FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

## Feb 10, 2002 8:00 am Secretary of State 645532 DOCUMENT # 1. Entity Name 02-10-2002 90022 011 \*\*\*150.00 MARY W. BRAND, INC. Principal Place of Business Mailing Address 4554 CENTRAL AVE 4554 CENTRAL AVE SUITE B-1 SUITE B-1 ST PETERSBURG FL 33711 ST PETERSBURG FL 33711 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1952236 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRAND, MARY W Street Address (P.O. Box Number is Not Acceptable) 4554 CENTRAL AVE SUITE B-1 ST PETERSBURG FL 33711 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Delete TITLE TITLE BRAND, MARY W. NAME NAME STREET ADDRESS 1430 SEA GULL DRIVE S STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE ۷ſ ☐ Delete NAME NAME BRAND, MARY W. STREET ADDRESS 1430 SEA GULL DRIVE S STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Addition Change ☐ Delete TITLE TITLE SD NAME NAME BRAND, MARY W. STREET ADDRESS 1430 SEA GULL DRIVE S STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL CITY-ST-ZIP [] Change ☐ Delete ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Elock 11 or Block 12 if

MARY W. BRAND

JANUARY 22, 2002 (727) 321-3787