

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 92206 038 \*\*\*\*\*61.25

**DOCUMENT # NO1000005721**

1. Entity Name

**FIND EASE INC.**



Principal Place of Business

**687 ALDERMAN RD., PMB 212  
PALM HARBOR FL 34683**

Mailing Address

**687 ALDERMAN RD., PMB 212  
PALM HARBOR FL 34683**

2. Principal Place of Business

**505 Orange St.**

3. Mailing Address

**505 Orange St.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Palm Harbor FL**

City & State

**Palm Harbor FL**

Zip

**34683**

Country

**USA**

Zip

**FL 34683**

Country

**USA**

4. FEI Number **59-3738990**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**TIERNAN, TINA MARIE  
687 ALDERMAN RD., PMB 212  
PALM HARBOR FL 34683**

7. Name and Address of New Registered Agent

Name **Tina Marie Tiernan**

Street Address (P.O. Box Number is Not Acceptable)  
**505 Orange St.**

City **Palm Harbor**

**FL**

Zip Code  
**34683**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

**Tina Marie Tiernan Tina Marie Tiernan 3/6/03**

Signature, typed or printed name of registered agent and the if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **TIERNAN, TINA MARIE**  
STREET ADDRESS **687 ALDERMAN RD., PMB 212**  
CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE **D** ☐ Delete  
NAME **MARCHANT, TANYA**  
STREET ADDRESS **1635 FURMAN RD.**  
CITY-ST-ZIP **JACKSONVILLE FL 32217**

TITLE **D** ☐ Delete  
NAME **VARELA, ERIN**  
STREET ADDRESS **304 S. BARTRAM TRAIL**  
CITY-ST-ZIP **JACKSONVILLE FL 32259**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Executive Director** ☒ Change ☐ Addition  
NAME **Tina Marie Tiernan**  
STREET ADDRESS **505 Orange St.**  
CITY-ST-ZIP **Palm Harbor, FL 34683**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Tina Marie Tiernan Tina Marie Tiernan 3/6/03 727-189-5344**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)