

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 14, 2003 8:00 am
Secretary of State

01-14-2003 90083 001 ****61.25

DOCUMENT # **NO2000000399**

1. Entity Name

ACCESS TO DELIVERANCE, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5131 POLARIS ST

Suite, Apt. #, etc.

3. Mailing Address

5131 POLARIS STREET

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ORLANDO FLORIDA

City & State

ORLANDO FLORIDA

4. FEI Number

75-2991910

Applied For

Not Applicable

Zip

32819

Country

ORANGE

Zip

32819

Country

ORANGE

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

7. Name and Address of Current Registered Agent

Name

RODNEY F CAMBAC

Street Address (P.O./Box Number is Not Acceptable)

5131 POLARIS STREET

City

ORLANDO

FL

Zip Code

32819

**DO NOT WRITE
IN THIS SPACE**

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

RODNEY F. CAMBAC

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

RODNEY F. CAMBAC

(NOTE: Registered Agent signature required when reinstating)

12/31/02

DATE

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	T	PRESIDENT
NAME		RAOUL ARMSTRONG
STREET ADDRESS		1777 VENICE LN
CITY-ST-ZIP		MIAMI FL 33181
TITLE	T	VICE PRESIDENT
NAME		GEORGE FRANKLIN SMITH
STREET ADDRESS		8408 VILLAGE GREEN RD
CITY-ST-ZIP		ORLANDO FL 32818
TITLE	D	SECRETARY
NAME		RODNEY F CAMBAC
STREET ADDRESS		5131 POLARIS STREET
CITY-ST-ZIP		ORLANDO FLORIDA 32819
TITLE	T	TREASURER
NAME		KAREN ARMSTRONG
STREET ADDRESS		1777 VENICE LANE
CITY-ST-ZIP		MIAMI FL 33181
TITLE		
NAME		
STREET ADDRESS		
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

RODNEY F. CAMBAC - RODNEY F CAMBAC

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/31/02

Date

(407)

354 1258

Daytime Phone #

CR2E037B (12/01)