

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

FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90047 013 ****70.00

DOCUMENT # N02000002812

1. Entity Name
EXSULTATE! INC.



Principal Place of Business

C/O DON WALKER
222 SOUTHAMPTON LN
VENICE FL 34293

Mailing Address

C/O DON WALKER
222 SOUTHAMPTON LN
VENICE FL 34293

22004872



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Exsultate!
Suite, Apt. #, etc.
Box 394

Suite, Apt. #, etc.

City & State

City & State
Venice, Florida

4. FEI Number

75-3036470

Applied For

Not Applicable

Zip

Country

Zip
34284

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CRUSINBERRY, TOM
465 E RUBENS DR
NOKOMIS FL 34275

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	☐ Delete
NAME	CRUSINBERRY, TOM	
STREET ADDRESS	465 E RUBENS DR	
CITY-ST-ZIP	NOKOMIS FL 34275	
TITLE	DS	☐ Delete
NAME	BRUCE, PAT	
STREET ADDRESS	1222 CAPRI ISLE BLVD	
CITY-ST-ZIP	VENICE FL 34292-4456	
TITLE	DT	☐ Delete
NAME	ROBERTS, JANET	
STREET ADDRESS	1283 FLYING BRIDGE LN	
CITY-ST-ZIP	OSPREY FL 34229	
TITLE	D	☐ Delete
NAME	WALKER, DON	
STREET ADDRESS	222 SOUTHAMPTON LN	
CITY-ST-ZIP	VENICE FL 34293	
TITLE	D	☐ Delete
NAME	SHEPPARD, ELISE	
STREET ADDRESS	1065 SCHOONER LN	
CITY-ST-ZIP	ENGLEWOOD FL 34224	
TITLE	D	☐ Delete
NAME	Lois Tourangeau	
STREET ADDRESS	302 Greenwood Lake Dr.	
CITY-ST-ZIP	Venice, FL 34292	

TITLE	D	☐ Change ☒ Addition
NAME	Robert Bruce	
STREET ADDRESS	1222 Capri Isle Blvd.	
CITY-ST-ZIP	Venice, FL 34292-4456	
TITLE	D	☐ Change ☒ Addition
NAME	Lynne Green	
STREET ADDRESS	725 Groveland Ave	
CITY-ST-ZIP	Venice, FL 34292	
TITLE	D	☐ Change ☒ Addition
NAME	Dorothy Mumford	
STREET ADDRESS	283 Inner Dr. E	
CITY-ST-ZIP	Venice, FL 34292	
TITLE	D	☐ Change ☒ Addition
NAME	Gerald Mumford	
STREET ADDRESS	283 Inner Dr. E.	
CITY-ST-ZIP	Venice, FL 34292	
TITLE	D	☐ Change ☒ Addition
NAME	Mr. Richard Smith	
STREET ADDRESS	4273 Corso Venetian Blvd	
CITY-ST-ZIP	Venice, FL 34293	
TITLE	D	☐ Change ☒ Addition
NAME	Micki Feeteau	
STREET ADDRESS	2412 Lake Shore Dr.	
CITY-ST-ZIP	Nokomis, FL 34275	

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: *Thomas F. Crusinberry*
01/27/03 (941) 966-7264

CR2E037 (10/02)