2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02276

Entity Name: GUADALUPE CENTER, INC

FILED Feb 03, 2003 Secretary of State

		r E CENTER, INC.				
Current Pr	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
211 S 9TH IMMOKALE	ST EE, FL 34142	US				
Current Ma	ailing Address	:	New Maili	New Mailing Address:		
PO BOX 10 IMMOKALE	053 EE, FL 34143	US				
FEI Number:	59-2617151	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
CARMICHAEL, KEVIN 821 5TH AVE S # 201 NAPLES, FL 34102 US			4501 TAMI SUITE 300	NAPLES-LAWDOCK, INC. 4501 TAMIAMI TRAIL NORTH SUITE 300 NAPLES, FL 34103 US		
The above in the State	named entity su of Florida.	ıbmits this statement for the pu	urpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE: KIMBERLY	LEACH JOHNSON			02/03/2003	
	Electronic	Signature of Registered Ager	nt		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SD ()[LIEB, ROCHELLI 616 NASSAU STI IMMOKALEE, FL	REET	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	TD ()[CARMICHAEL, K 821 5TH AVE S # NAPLES, FL 34	[‡] 201	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	PD ()E MCCURDY, JACO 3341 CREEKVIE BONITA SPRING	W DR.	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VD ()[MEYERS, RICHA 1288 BOLD CYP NAPLES, FL 347	RESS LANE	Title: Name: Address: City-St-Zip:	BRAENDLE, D 25181 BAY C		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN CARMICHAEL TD 02/03/2003