2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003
Secretary of State

DOCUMENT# N40334

Entity Name: FRENCH-AMERICAN BUSINESS COUNCIL FOR GREATER ORLANDO (CENTRAL FLORIDA), INC.

Current Principal Place of Business:

2369 WHISPERING MAPLE DR
ORLANDO, FL 32837

New Principal Place of Business:

7626 SAND LAKE RD
ORLANDO, FL 32819

Current Mailing Address:

PO BOX 690535
ORLANDO, FL 328690535 US

New Mailing Address:

PO BOX 690535
ORLANDO, FL 32869 US

FEI Number: 59-3033537 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NADD, JOHN
2369 WHISPERING MAPLE DR
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

NARSISYAN, EDMONDE
7626 SAND LAKE RD
ORLANDO, FL 32819 US

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: EDMONDE NARSISYAN 04/23/2003
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PDST ( ) Delete
Name: NADD, JOHN
Address: 9217 HIDDEN BAY LANE
City-St-Zip: ORLANDO, FL 32879

Title: VD ( ) Delete
Name: DAGOT, BRIGETTE
Address: 7144 SOMERSWORTH CT.
City-St-Zip: ORLANDO, FL 32335

Title: ST ( ) Delete
Name: HARISYAN, EDMONDE
Address: 7626 SAND LAKE RD
City-St-Zip: ORLANDO, FL 32819

Title: VD ( ) Delete
Name: GUTIERREZ, DOMINIQUE
Address: 526 PARK AVE SOUTH
City-St-Zip: WINTER PARK, FL 32789

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: M (X) Change ( ) Addition
Name: PERCHE, JEAN-CLAUDE
Address: 5755 TIMBERVIEW TERR
City-St-Zip: ORLANDO, FL 32819

Title: VD (X) Change ( ) Addition
Name: DAGOT, BRIGITTE
Address: 7657 MOUNT CARMEL DR
City-St-Zip: ORLANDO, FL 32335

Title: ST (X) Change ( ) Addition
Name: NARSISYAN, EDMONDE
Address: 7626 SAND LAKE RD
City-St-Zip: ORLANDO, FL 32819

Title: VD (X) Change ( ) Addition
Name: METAIS, CATHERINE
Address: 10418 BRILLIANT CT
City-St-Zip: ORLANDO, FL 32836

Title: P ( ) Change (X) Addition
Name: PAUQUET, THIERRY
Address: 2369 WHISPERING MAPLE
City-St-Zip: ORLANDO, FL 32837

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: THIERRY PAUQUET P 04/23/2003
Electronic Signature of Signing Officer or Director — Date