

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 18, 2001 8:00 am
Secretary of State

09-18-2001 90015 040 ***550.00

DOCUMENT # P00000086215

1. Entity Name
FL HOLDING CO., Inc.

Principal Place of Business Mailing Address
Pointe Orlando Shopping Center **Pointe Orlando Shopping Center**
Int'l Drive at Republic Drive **Int'l Drive at Republic Drive**
Store #E1/E2 **Store #E1/E2**
Orlando, FL 32819 **Orlando, FL 32819**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
15525 N. 83rd Way #B-7

City & State City & State
Scottsdale, AZ

Zip Country Zip Country
85260 **Maricopa**

4. FEI Number Applied For
91-2076898 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CT Corporation System
1200 S. Pine Island Rd.
Plantation, FL 33324

7. Name and Address of New Registered Agent
 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.

SIGNATURE  DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		P/T/S/D Ronald C. Malone 15525 N. 83rd Way, #B-7 Scottsdale, AZ 85260	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: **9/13/01**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)

DO NOT WRITE IN THIS SPACE