Apr 16, 2003 8:00 am Secretary of State

FILED

04-16-2003 90146 030 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000020584 **DOCUMENT #**



ADVANTA	LE, INC.				0110200	201 10		.,.				
Principal Place of Business 13051 N. CLEVELAND AVE. N. FORT MYERS FL 33903			Mailing Address 13051 N: GLEWETAND AVE. N. FORT MYERS FL 33982.				60018671					
2. Principal F	Place of Busin	ess	% Affiliate Division 3. Mailing Address									
Suite, Apt.	#, etc.		5810 West Cypress Street Suite, Apt. #, etc.			et	☐ CHECK HERE IF MAKING CHANGES					
City & Stat	<u> </u>		Svite E City & State				A FCI Number					
			Tampa, FL				65-108021/ Not Applicable					1
Zip		Country	33607 -	Cour	us:A—	-5	Certificate of Status Desired	-X	\$8.75 Fee Red	Addit quired	tional	
6. Name and Address of Current R					7.	7. Name and Address of New Registered Agent						
SCHILLER, LARRY F 13051 N. CLEVELAND AVE.					Name Michael La Rosa Street Address (P.O. Box Number is Not Acceptable) 5810 West Cypress Street							1
	MYERS FL 3				Suite E						1	
	er e			City -	ampa	<u> </u>	F	Zip	Code	607	† ·	
	named entity		the purpose of changing its	s register			gent, or both, in the State of F	lorida. La				1
SIGNATURE	Signature, typed	or printed name of registered agent a	nd title if applicable. (NO	TE: Registere	od Agent signature	required when	reinstating)	1/10 DAT	03	·		
Afte	r May 1, 200	FEE IS \$150.00 3 Fee will be \$550.00 Florida Department of	State			Election Campaign F Trust Fund Contributi	-			May Be to Fees		
10.		OFFICERS AND D	DIRECTORS	11.		A[DDITIONS/CHANGES TO OF	FICERS A	ND DIREC	TORS	IN 11]_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5915 SAND	THEODORE E DBURG DRIVE RS FL 33903-5820	☐ Delete		1				☐ Cha	nge	Addition	CR2E034 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5915 SAN	KATHERINE M DBURG DRIVE RS FL 33903-5820	☐ Delete		t				☐ Cha	nge	Addition	CR2
TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Delete		ſ				☐ Chai	nge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete						☐ Cha	nge	Addition	<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		□ Delete						☐ Cha	nge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete						Chai	nge	Addition	
17 Incres	anchine that the											

I hereby certify that the information supplied with this filling 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 tostee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attackment with all other like impowered.

SIGNATURE:

Daytime Phone #

Allackment # 701000020584

April 9, 2003

Uniform Business Report Division of Corporations Post Office Box 1500 Tallahassee, FL 32302-1500

Re: Uniform Business Report for Advantage 5 Title, Inc.

Dear Sir or Madam:

Enclosed, please find an executed Uniform Business Report for Advantage 5 Title, Inc. Included is a check in the amount of \$158.⁷⁵, made payable to "Florida Department of State", for the Filing Fee and Certificate of Status.

If any additional information is required, please do not hesitate to contact me at (813) 289-7777.

Thank you for your consideration.

Sincerely,

Michael LaRosa Associate Counsel