2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Sep 12, 2003 8:00 am Secretary of State

DOCUMENT # P01000 1. Entity Name MULTIPLE COUNTY INVESTMENTS, IN	07-23-2003 90055 016 ***150.00		
Principal Place of Business 313 DIRKSEN DRIVE BUILDING D DEBARY FL 32713	Mailing Address PO BOX 390757 DELTONA FL 32739		55056464
2. Principal Place of Business	3, Mailing Address		
313 Dinksen DK			
Suite, Apt. #. etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & State	City & State	m/	4. FEI Number 59-3760918 Applied For
DeRaky F/	Deltoner	7	Not Applicable
32713 Country SiA	32739	Country VOZUS/A	5. Certificate of Status Desired
			7. Name and Address of New Registered Agent
		Name	· · · · · · · · · · · · · · · · · · ·
VOUGHT, JON J		Street Address	s (P.O. Box Number is Not Acceptable)
313 DIRKSEN DRIVE			
BUILDING D			
DEBARY FL 32713		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 natural registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of St			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10. OFFICERS AND DIR	RECTORS	11,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE OFFI NAME CLEMENTS, LATARA OFFICER STREET ADDRESS 313 DIRKSEN DR CITY-ST-ZP DEBARY FL 32713	C) Delete	NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
NAME ODONNELL, MICHAEL OFFICER STREET ADDRESS 313 DIRKSEN DR	☐ Oelete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition
OITY-ST-ZIP DEBARY FL 32713 TITLE OFF		CITY-ST-ZIP	The same
TITLE OFF NAME VOUGHT, JON OFFICER	☐ Delete	TITLE NAME	Change Addition
STREET ADDRESS 313 DIRKSEN DR		STREET ADDRESS	
CITY-ST-ZIP DEBARY FL 32713		CITY-ST-ZIP	
TILE	Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS	ļ	NAME STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	. Change Addition
NAME	i	NAME	- {
STREET ADORESS		STREET ADDRESS	

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 607, 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.

TITLE

NAME

STREET ADDRESS City-St-Zip

SIGNATURE:

MILE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATUSE REDUIR TO LIVE (ODOLINE)

Delete

5-12-03

860 / 608

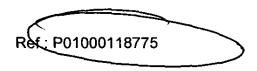
☐ Change

Addition

attachment

55056464

September 7, 2003



To Whom It May Concern:

I have received a copy of my return but not the check. I did not receive the first notice to file my return and therefore, I was late. I called your office and I was advised that the late charge would be removed. Since then, I have received a copy of my return and a letter demanding \$400.00.

I called again this morning and I was advised to write this letter and attach the copy of my return. Please help me with this return. Thank you.

Michael O'Donnell