FEI Number

FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90238 045 ***150.00

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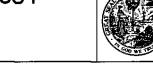
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2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR

1. Entity Name

WILLA FORD, INC.



Principal Place of Business 755 W. LUMSDEN ROAD SUITE B BRANDON FL 33511

Mailing Address 755 W. LUMSDEN ROAD SUITE B

BRANDON FL 33511

2. Principal Place of Business	3. Mailing Address				
Suite, Apt. #, etc.	Suite, Apt. #, etc.				
City & State	City & State				

Zio



CHECK HERE IF MAKING CHANGES

314418

	5. Certificate of Status Desired Fee F					
6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent					
	Name					
SERAFIN, HEATHER						
*	Street Address (P.O. Box Number is Not Acceptable)					
755 W. LUMSDEN ROAD						
SUITE B						
BRANDON FL 33511	City P1 7					

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.

City

Country

Zip

Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

Country

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Applied For

\$8.75 Additional Fee Required

Zip Code

Not Applicable

	<u>l</u>					
10.	OFFICERS AND DIRECTORS	S	11,	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	IN 11
TITLE	PD	· ☐ Delete	TITLE		☐ Change	☐ Addition
NAME **	WILLIFORD, AMANDA		NAME			
STREET ADDRESS	755 W. LUMSDEN ROAD SUITE B		STREET ADDRESS			
CITY-ST-ZIP	BRANDON FL 33511		CITY-ST-ZIP			
TITLE	VD	☐ Delete	TITLE		☐ Change	☐ Addition
NAME _	_WILLIFORD, DONNA	_	NAME			
STREET ADDRESS	755 W. LUMSDEN ROAD SUITE B	C C C C C C C C C C C C C C C C C C	STREET ADDRESS	and the Charles of the section of th		-
CITY-ST-ZIP	BRANDON FL 33511		CITY-ST-ZIP			
TITLE	TD	☐ Delete	TITLE		☐ Change	☐ Addition
NAME	Serafin, Heather		NAME			į
STREET ADDRESS	755 W. LUMSDEN ROAD SUITE B		STREET ADDRESS			ĺ
CITY-ST-ZIP	BRANDON FL 33511		CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	Addition
NAME			NAME			
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CITY-ST-ZIP			CITY-ST-ZIP			
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STREET ADDRESS			STREET ADDRESS			}
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition
NAME			NAME	·		
STREET ADDRESS			STREET ADDRESS			
CITY-ST-7IP			CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or suppliemental 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

SIGNATURE:

Date

Daytime Phone #