

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000015833

FILED  
Apr 07, 2003  
Secretary of State

Entity Name: PRAIRIE VIEW FARM, INC.

**Current Principal Place of Business:**

305 ELEUTHERA CT  
ST AUGUSTINE, FL 32095

**New Principal Place of Business:**

**Current Mailing Address:**

305 ELEUTHERA CT  
ST AUGUSTINE, FL 32095

**New Mailing Address:**

FEI Number: 59-3495427      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ROSENBLUM, RICHARD M  
4168 PRIMA VISTA CIRCLE N.  
JACKSONVILLE, FL 32217      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: SAWYER, MARK D  
Address: 8549 ACREE ROAD  
City-St-Zip: JACKSONVILLE, FL 32219

Title: D      ( ) Delete  
Name: ROSENBLUM, RICHARD M  
Address: 4168 PRIMA VISTA CIRCLE N.  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D      ( ) Delete  
Name: ROSENBLUM, S R JR  
Address: 117 DEER LAKE DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D      ( ) Delete  
Name: FONTAINE, C L  
Address: 305 ELEUTHERA CT  
City-St-Zip: ST AUGUSTINE, FL 32095

Title: D      (X) Delete  
Name: FONTAINE, LEE H  
Address: 7846 PLAYA DEL RAY COURT  
City-St-Zip: JACKSONVILLE, FL 32256

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C L FONTAINE

Electronic Signature of Signing Officer or Director

PRES

04/07/2003

\_\_\_\_\_ Date