

FILED
Apr 26, 2004 8:00 am
Secretary of State

DOCUMENT # N07368

The seal of the State of Florida is circular. It features a central illustration of a landscape with a palm tree, a ship, and a building. The text "GREAT SEAL OF THE STATE OF FLORIDA" is inscribed around the top inner edge, and "IN GOD WE TRUST" is at the bottom.

Mailing Address

10151 GIFFORD BLVD
ORLANDO FL 32821

3. Mailing Address

Suite, Apt. #, etc.

City & State

Country

Country

59-2489896

Not Applicable

☐ **\$8.75** Additional
Fee Required

7. Name and Address of New Registered Agent

Name MACALUSO, MARGARET

Street Address (P.O. Box Number is Not Acceptable)
5260 WATERVISTA DRIVE

1

City ORLANDO

FL	Zip Code 32821
----	-------------------

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Dir	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Stanley Buxbaum		
STREET ADDRESS	4942 Gifford Blvd.		
CITY-ST-ZIP	Orlando, Fl 32821		

TITLE	PD 5D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	MARGARET MACALUSO		
STREET ADDRESS	5260 WATERVISTA DRIVE		
CITY - ST - ZIP	ORLANDO, FL 32821		

TITLE	Dir	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Dan Longenberger		
STREET ADDRESS	4500 Bar Harbor Drive		
CITY-ST-ZIP	Orlando, Fl 32821		

TITLE	Dir	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	JUDY Lancaster		
STREET ADDRESS	4702 Gardenbrook Lane		
CITY - ST - ZIP	Orlando FL 32821		

TITLE	Dir	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Don Smith		
STREET ADDRESS	10307 Gifford Blvd		
CITY-ST-ZIP	Orlando, FL 32821		

TITLE	Dir	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Art McFarlane		
STREET ADDRESS	4414 Bar Harbor Drive		
CITY-ST-ZIP	Orlando, FL 32821		

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 617, 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.

SIGNATURE: Margaret Macaluso Margaret Macaluso 4/15/04 407-345-8206
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #