


2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2003 8:00 am
Secretary of State

01-24-2003 90080 031 ****61.25

DOCUMENT # N99000002247	
1. Entity Name S E D R A I N C.	

Principal Place of Business C/O NORA K. MASK 1598 E. SILVER STAR ROAD OCOE FL 34761	Mailing Address C/O NORA K. MASK 1598 E. SILVER STAR ROAD OCOE FL 34761
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3637533		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			
MASK, NORA K 1598 E SILVER STAR RD OCOE FL 34761			
7. Name and Address of New Registered Agent			
Name			
Street Address (P.O. Box Number is Not Acceptable)			
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 name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD NAME BURKS, LYNNETTE STREET ADDRESS 13400 RUNNING WATER RD CITY-ST-ZIP PALM BEACH GARDENS FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VPD NAME GARDNER, GAYLE STREET ADDRESS 5105 PORTER RD. CITY-ST-ZIP WHITE SPRINGS FL 32096	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SD NAME CARLSON, BETH STREET ADDRESS 17710 ROCKY PINES RD CITY-ST-ZIP JUPITER FL 33478	<input checked="" type="checkbox"/> Delete	TITLE SD NAME MEYER, DEENA STREET ADDRESS 10155 S. FORESTLINE AVENUE CITY-ST-ZIP INVERNESS, FL 34452	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE TD NAME MASK, NORA STREET ADDRESS 1120 N LAKEWOOD CITY-ST-ZIP OCOE FL 34761	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE ASD NAME THOMPSON, CAROL STREET ADDRESS PO BOX 302 CITY-ST-ZIP MIMS FL 32754	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS 3715 Pennsylvania Ave. CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE RSD NAME GINN, JAYNE STREET ADDRESS 16124 126TH TERR N CITY-ST-ZIP JUPITER FL 33478	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: SIGNATURE OF NORA K. MASK 1-18-03 407/299-0301
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E037 (10/02)

Attachment

Document# N99000002247
FBI # 59-3637533

Additional Directors of SEDRA Inc. 2003

D

Anita Couch
11552 162nd Place North
Jupiter, FL 33478

80013570

D

Carolyn Maillard
19500 Quarterly Pkwy
Orlando, FL 32833

D

RuthAnn McMahon
12257 Sandy Run
Jupiter, FL 33478

D

Jodie Moore
2781 West Glenn St.
Lecanto, FL 34461

D (Alternate)

Nancy Cloos
20308 Sugarloaf Mt Rd
Clermont, FL 34711

D (Alternate)

Nancy Douglass
1607 Tomahawk Tr
Lakeland, FL 33813

D (Alternate)

Dorothy Zay
10032 S. Heatherhill Terrace
Inverness, FL 34452