Principal Place of Business	00 am tate
Suite, Apt. #, etc.  City & State  Country  Sc. Certificate of Status Desired   \$8.75 Fee Re  6. Name and Address of Current Registered Agent  YETTER, DONALD W 1402 3RD AVE. WEST BRADENTON FL 33505  City  FL Zip  City  FL Zip  City  FL Zip  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida.  Signature, great or predict name of registered agent and site if applicable  (NOTE Registered Agent signature required when remetating)  After MAY 1, 2001 Fee will be \$550.00  Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. FEI Number 599-1493784  States Address of Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City  FL Zip  City  FL Zip  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. Election Campaign Financing  After MAY 1, 2001 Fee will be \$550.00  Make Check Payable to Department of State  14. FEI Number 599-1493784  City  FL Zip  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  City ST-2P  OUSZEWSKI, MICHAEL  INME  SIREET ADDRESS  GITY-ST-2P  OUSZEWSKI, MICHAEL  INME  SIREET ADDRESS	
City & State  Country  Country  Country  Country  Country  Country  S. Certificate of Status Desired   \$8.75 Fee Re Re Re Registered Agent   \$8.75 Fee Re Registered Agent   \$9.75 Fee Re Registered Agent   \$9.75 Fee Re	
City & State    City & State   City & State   City & State   Status Desired   Status Desire	
Fee Re  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name    Name	Applied For Not Applicable
FILE NOW!!! FEE IS \$150.00  After MAY 1, 2001 Fee will be \$550.00  Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. TITLE  NAME  PORT CHARLOTTE FL  TITLE  V  OUSZEWSKI, MICHAEL  V  OUSZEWSKI, MICHAEL  TITLE  OUSWELL  TO CHE  TITLE  TO CHE  TITLE  OUSWELL  TO CHE  TITLE  TO C	5 Additional
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City FL Zip  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.  Signature  Signature  Signature includes agent and office or registered agent with a policiable (NOTE Registered Agent signature required when referenting)  9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so.  (See orderia on back)  TITLE  VD  OFFICERS AND DIRECTORS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VO  OLISZEWSKI, MICHAEL  TITLE  PD  OLISZEWSKI, MICHAEL  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  PORT CHARLOTTE FL  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  PORT CHARLOTTE FL  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET	
### 1402 3RD AVE. WEST BRADENTON FL 33505    City   FL   Zip	
RADENTON FL 33505  City FL Zip  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.  Signature. Speed or printed name of registered agent and stile if applicable (NOTE Registered Agent signature required when reinstating)  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.   After MAY 1, 2001 Fee will be \$550.0	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  10. Election Campaign Financing Trust Fund Contribution.  After MAY 1, 2001 Fee will be \$550.00  Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11ILE  VD  PADGETT, WILLIAM  STREET ADDRESS  21. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11ILE  NAME  PADGETT, WILLIAM  STREET ADDRESS  21. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11ILE  V OUSZEWSKI, MICHAEL  NAME  STREET ADDRESS  11S HILLCREST DR  BRADENTON FL  TITLE  NAME  PADGETT, AGNES  3473 SUNRISE TR  CITY-ST-ZIP  PD  Delete  TITLE  NAME  STREET ADDRESS  3473 SUNRISE TR  Delete  TITLE  NAME  STREET ADDRESS  3473 SUNRISE TR  Delete  TITLE  NAME  STREET ADDRESS  3473 SUNRISE TR  PORT CHARLOTTE FL  TITLE  NAME  STREET ADDRESS  3473 SUNRISE TR  CITY-ST-ZIP  PORT CHARLOTTE FL  TITLE  NAME  STREET ADDRESS  3473 SUNRISE TR  CITY-ST-ZIP  PORT CHARLOTTE FL  TITLE  NAME  STREET ADDRESS  STREET A	
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.  SigNATURE    Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE     Part   DATE   DATE	o Code
Tax filing requirement and elects to do so.  (See criteria on back)    Make Check Payable to Department of State   Trust Fund Contribution.   A Make Check Payable to Department of State	<b>\$5,00</b> May Be
TITLE VD Delete TITLE NAME  PADGETT, WILLIAM  STREET ADDRESS CITY-ST-ZIP  PORT CHARLOTTE FL  CITY-ST-ZIP  TITLE V OLISZEWSKI, MICHAEL NAME STREET ADDRESS CITY-ST-ZIP  TITLE PD Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE PD Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE PD Delete TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME STREET ADDRESS	Added to Fees
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TITLE NAME STREET ADDRESS CITY-ST-ZIP  13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that	

SIGNATURE: March OCI 3 Z EWSEN

\*SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-253- 6.405 Daytime Phone #

1-8-01