2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR

557927 DOCUMENT #

1. Entity Name

LEISURE ATTRACTIONS, INC.



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

02-24-2003 90948 007 ***150.00



Principal Place of Business Mailing Address 5137 JUNGLE PLUM RD P. O. BOX 4009 SARASOTA FL 34242 SARASOTA FL 34230 US 2. Principal Place of Business 3. Mailing Address 5151 Jungle Plum Road Suite, Apt. #, etc. Suite, Apt. #, etc. □ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For Sarasota, FL59-1806404 Not Applicable Zip Country Zip Country \$8.75 Additional 34242 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOLLINGSWORTH, FRED. III Street Address (P.O. Box Number is Not Acceptable) 5151 Jungle Plumb Road 5137 JUNGLE PLUM RD SARASOTA FL 34242 Sarasota. THIS IS AN ADDRESS CHANGE ONLY 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 \$150,00 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change PTD ☐ Addition NAME HOLLINGSWORTH, FRED III NAME HOLLINGSWORTH, FRED III STREET ADDRESS 5137 JUNGLE PLUM RD STREET ADDRESS 5151 Jungle Plum Road Sarasota, Florida 34242 CITY-ST-ZIP SARASOTA FL 34242 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME HOLLINGSWORTH JUDY, M HOLLINGSWORTH, JUDY M. NAME STREET ADDRESS 5137 JUNGLE PLUM RD 5151 Jungle Plum Road STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34242 Sarasota, Florida 34242 ... CITY STEPP TITLE Delete TITLE Change ☐ Addition NAME O'REILLY, FRANCES H NAME HOLLINGSWORTH, FRED IV STREET ADDRESS 4136 ESCONDITO CIRCLE STREET ADDRESS 2357 SAPODILLA CITY-ST-7# sarasota fl 34238 CITY-ST-ZIP ST. JAMES CITY, FL 33596 TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IF ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 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)(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 607, 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

OF SIGNING DEFICER OF OURECTOR F.S. T.DENT