2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

574337 **DOCUMENT #**

1. Entity Name

BALLARD ENTERPRISES OF LEE COUNTY, INC.



FILED Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90181 001 ***150.00

Principal Place of Business 1506 S.E. 46TH STREET CAPE CORAL FL 33904 2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country Mailing Address 1506 S.E. 46TH STREET CAPE CORAL FL 33904 Address Suite, Apt. #, etc. City & State Zip Country	CHECK HERE IF MAKING CHANGES
Suite, Apt. #, etc. City & State City & State	
City & State City & State	☐ CHECK HERE IF MAKING CHANGES
Only distinct	I I CHECK HERE IF MAKING CHANGES
Only distinct	
Zip Country Zip Country	4. FEI Number 59-1827069 Applied For Not Applicable
	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MILLER, VIVIAN 1506 S.E. 46TH STREET CAPE CORAL FL 33904	et Address (P.O. Box Number is Not Acceptable)
City	FL 12,0000
8. The above named entity submits this statement for the purpose of changing its registered offic the obligations of registered agent. SIGNATURE	e or registered agent, or both, in the State of Florida. I am familiar with, and accept
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent s	ignature required when reinstating) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS 11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE P Delete TITLE NAME MILLER, W. D. STREET ADDRESS CITY-ST-ZIP CAPE CORAL FL 33904 TITLE NAME STREET ADDRE CITY-ST-ZIP	☐ Change ☐ Addition
TITLE ST □ Delete TITLE NAME MILLER, VIVIAN NAME STREET ADDRESS 1506 SE 46 STREET STREET ADDRES CTY-ST-ZIP CAPE CORAL FL 33904 CITY-ST-ZIP	, Change Addition
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ITLE ☐ Delete TITLE IAME NAME TREET ADDRESS STREET ADDRES ITY-ST-ZIP CITY-ST-ZIP	☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR