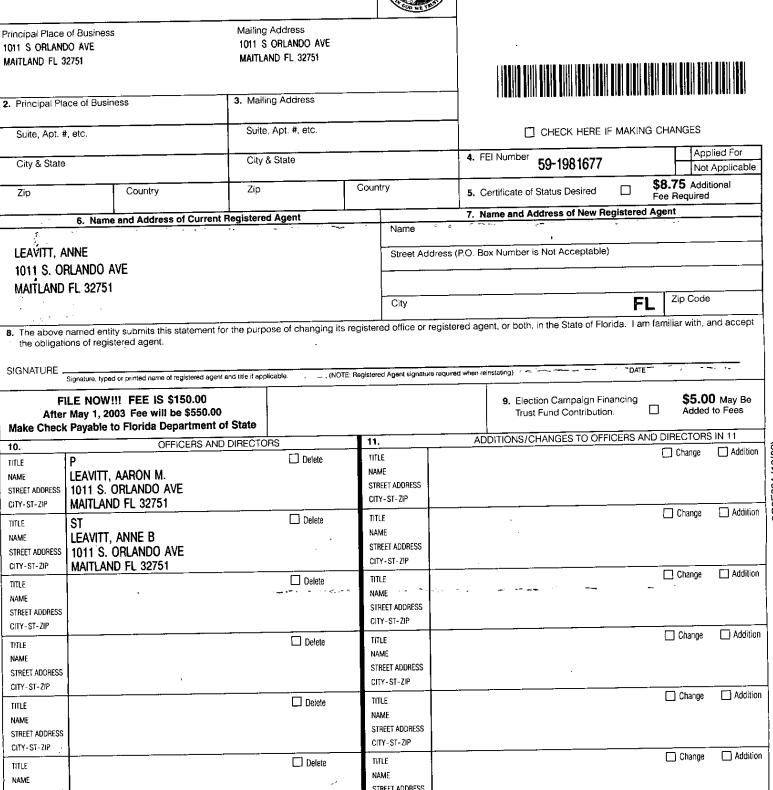
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

646774 **DOCUMENT #**

1. Entity Name

AARON'S COUNTRY STORE, INC.



FILED Feb 06, 2003 8:00 am Secretary of State

02-06-2003 90056 014 ***150 00

INTE NAME INTER IN	10.	OFFICERS AND DIRECTORS			11. ADDITIONS/OFF/INGLETIC OFF/IGUIDA		
ITITE VAME LEAVITT, ANNE B LEAVITT, ANNE B STREET ADDRESS CITY-ST-ZIP MAITLAND FL 32751 TITTLE NAME STREET ADDRESS CITY-ST-ZIP TITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP	IITLE NAME STREET ADORESS	LEAVITT, AARON M. 1011 S. ORLANDO AVE	Delete	NAME STREET ADDRESS		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	NAME STREET ADDRESS	LEAVITT, ANNE B 1011 S. ORLANDO AVE	□ Delete -	NAME STREET ADDRESS			Addition
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TITLE NAME STREET ADDRESS CITY ST. 7/9	TITLE NAME STREET ADDRESS		☐ Delete	NAME STREET ADDRESS			Addition
CITY-SI-ZIP	NAME			NAME		Change	Addition

12. 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 the information indicated on this report or supplemental report is true 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 by 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 of the corporation or the receiver changed, or on an attachment

SIGNATURE:

Daytime Phone #

CR2E034 (10/02)