## 2003 NOT-FOR-PROFIT CORPORATION

DOC 1. Entity N	UMENT # 704354 DME BUILDERS ASSOCIATION	1			Ja S	n 17, 20 ecretar 01-17-2003 901	$\mathbf{y}$ of $\mathbf{S}$	tate	1
Principal Place of Business  5959 CATTLEMEN LANE SARASOTA FL 34232  2. Principal Place of Business		Mailing Address 5959 CATTLEMEN LANE SARASOTA FL 34232							
		3. Mailing Address		<del></del>					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number <b>59-1001688</b> Applied For				
Zip	Country	Zip	Country		5. Certificate of S	<del>-</del>	\$9.75	Not Applicabl	е
	6. Name and Address of Curren	it Registered Agent				_	Fee Requi		_
CLEMENTS, L DICKSON			Name	7. Name and Address of New Registered Agent					
5959 C/	ATTLEMEN LANE DTA FL 34232	Street Address			O. Box Number is I	Not Acceptable)			= -
	re named entity submits this statement fations of registered agent.		City	·	<del>-</del>	<u> </u>	FL Zip Co		$\dashv$
	Signature, typed or printed name of registered agen FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund Co	Registered Agent sign paign Financing ontribution.		55.00 May Be added to Fees	Make Ch Florida De	neck Payable	to State	
10.	OFFICERS AND DI	RECTORS	11,	AC	DITIONS/CHANGE	S TO OFFICERS AND	DIRECTORS II	N 10	4
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CANNON, JOHN 5959 CATTLEMEN LANE SARASOTA FL 34232	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	PD MIKE 5959	PAOGETT CAHLEME	N LANE	Change	☐ Addition	37 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PADGETT, MIKE 5959 CATTLEMEN LANE SARASOTA FL 34232	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	NPD BOB 5959	sisum cahleme asota, Fo	NLAN	Change	☐ Addition	CR2E0
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDTS SISUM, BOB 5959 CATTLEMEN LANE SARASOTA FL 34232	□ Delete - · ·	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SATS	NE FARRE CATTLEM SOTA, FL	ـــــــــــــــــــــــــــــــــــــ	Change	Addition	- :
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVP CLEMENTS, L. DICKSON 5959 CATTLEMEN LANE SARASOTA FL 34232	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME				☐ Change	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 changed, or on an attachment with an address, with all other like empowers.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

1/14/03