## 2002 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 708266** 1. Entity Name

## FILED May 10, 2002 8:00 am § Secretary of State

ORLANDO SCIENCE CENTER, INC.		*	05-10-2002 90038 034 ****70.00			
Principal Place of Business	Mailing Address					
777 EAST PRINCETON STREET ORLANDO FL 32803 US	777 EAST PRINCETON S ORLANDO FL 32803 US			•		
2. Principal Place of Business	3. Mailing Address	<del></del>				
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State	City & State	<u> </u>	4. FEI Number		Applied For	
Zip Country	Zip	Country	5. Certificate of Stat	0896343	Not Applicable 75 Additional	
6. Name and Address of Curre	ent Registered Agent	<u> </u>		us Desired Fee F	Required	
		Name		33 Of Now Neglatered Agent	 	
CAVENDISH, KIM M		Street Addr	ess (P.O. Box Number is No	t Acceptable)		
777 EAST PRINCETON STREET ORLANDO FL 32803						
		City		F1 7	p Code	
3. The above named entity submits this statemen	of the purpose of changing it	s registered office or re-	internal and the second			
Signature, typed or printed name of registered ag		E: Registered Agent signature red	quired when reinstating)	DATE		
FILE NOW: FEE IS \$61.25	9. Election Ca	TE: Registered Agent signature recently and the signature recently appearance of the	\$5.00 May Be Added to Fees	Make Check Pay Department of	able to State	
FILE NOW: FEE IS \$61.25  O. OFFICERS AND I	9. Election Ca Trust Fund	mpaign Financing	\$5.00 May Be Added to Fees	Make Check Pay	State	
FILE NOW: FEE IS \$61.25  OFFICERS AND IT TLE TC AME SOILEAU, M.J. PH.D	9. Election Ca Trust Fund	mpaign Financing Contribution.	\$5.00 May Be Added to Fees	Make Check Pay Department of	State PRS IN 10	
O. OFFICERS AND ITTLE TO SOILEAU, M.J. PH.D ADM 243, UNIVERSITY OF CEN	9. Election Ca Trust Fund	mpaign Financing Contribution.   11. TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Make Check Pay Department of	State PRS IN 10	
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12. Indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under outrit, that I am an officer of director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Fierral States; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

GNATURE:

SIGNATURE:

SIGNATURE: