FILED Sep 18, 2001 8:00 am Secretary of State 2001 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 714514** 1. Entity Name SUCCESS TODAY INTERNATIONAL, INC. 09-18-2001 90001 019 ****70.00 Principal Place of Business Mailing Address P.O. BOX 570460 9616 MCNORTON DR 979284 ALTAMONTE SPRINGS FL 32714 ORLANDO FL 32857-0460 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1286571 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent EAGLE RYAN WOOTEN, RICHARD T Street Address (P.O. Box Number is Not Acceptable) 1100 PALMA DR ORLANDO FL 32805 7 SAGE QR. Zip Code 32807 RLAN DO 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 8/28/2001 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: Trust Fund Contribution. **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change **Addition** ☐ Delete TITLE TITLE RYAN EAGLE LAUGHLIN, TERENCE NAME NAME 5827 SAGE DR. STREET ADDRESS 9616 MCNORTON DR. STREET ADDRESS ORLANDO FLA 32807 CITY-ST-ZIP CITY-ST-ZIP **ALTAMONTE SPRINGS FL 32714** Delete ☐ Addition TITLE ☐ Change TITLE NAME EAGLE, SANDY NAME STREET ADDRESS 5827 SAGE DR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32807 ☐ Change ☐ Addition ☐ Delete TITLE TITLE YORK, BRIAN J NAME NAME STREET ADDRESS 6381 CASCADE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **KEYSTONE HTS FL 32656** ☐ Change ☐ Addition TITLE TITLE ☐ Delete PFAENDER, RICHARD E JR NAME NAME STREET ADDRESS STREET ADDRESS 25419 LUKE ST CITY-ST-ZIP CITY-ST-7IP CHRISTMAS FL 32709 ☐ Delete TITLE ☐ Change . Addition TITLE PERCY, TAMARA L NAME

STREET ADDRESS

STREET ADDRESS

ELAUGHLIND

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

CITY-ST-ZIP

TITLE

NAME

☐ Delete

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

1100 PALMA DR

1100 PALMA DR

ORLANDO FL 32805

WOOTEN, RICHARD T

ORLANDO FL 32805

changed, or on an attachment with an address, with all oth

4074155589

☐ Change

Addition