2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 716303

1. Entity Name



FILED
Mar 05, 2003 8:00 am §
Secretary of State

| | | | 03-05-2003 90045 022 ****61.25 | | | | | |
|--|---|---|--|---------------|--------------------------------------|---|--|-------------------------------------|
| Principal Place of Business 231 E LANTANA RD LANTANA FLA 33462 | | Mailing Address 231 E LANTANA RD LANTANA FLA FL 33462 US | | | 1 /14 (1) (1 4 (14) | 11 818 8 118 8 8118 88 18 8 1 | 1/1 8/8/1 8/8/1 8/8 /2 8/8 | III SIĜII BIGIA IGRI |
| 2. Principal | Place of Business . | 3. Mailing Address | | - | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | $\overline{}$ | ☐ CHECK HERE IF MAKING CHANGES | | | |
| City & State | | City & State | | | 4. FEI Number 59-1237357 | | | Applied For |
| Zip | Country | Zip | Country | | 5. Certificate of S | Status Desired | | Not Applicable Additional |
| | 6. Name and Address of Current | Registered Agent | | | . Name and Ad | dress of New Reg | Fee Req | uirea |
| | ميه ي منبود في برميد المستحد | a si nise i y e | Name | | | areas or men mag | - Agent | ·· <u> </u> |
| SINCLAI | r, susan | | | | Ray Number in | Not Acceptable) | | |
| 231 E. L | antana road | | Street Add | uress (P.O | . DUX NUMBER IS | rvot Acceptable) | | |
| LANTAN | A FL 33462-2725 | | | | | | | |
| • | • | | City | | | - | FL Zip (| Code |
| 8. The above | e named entity submits this statement fo | or the purpose of changing its | registered office or re | egistered | agent, or both, in | the State of Florid | da. I am familiar w | rith, and accept |
| ्र ine obliga | ations of registered agent. | 1 ' 1 | 4 | | | | | |
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| | | | | . / | | | 5 - U - U · | _ |
| SIGNATURE | | and title if applicable //NOTE | · Registered Agent signature | required who | n rejectoting\ | | DATE | |
| SIGNATURE | Signature, types or printed name of registered agent | and title if applicable. (NOTE | : Registered Agent signature | required whe | en reinstating) | | DATE | |
| | | 9. Election Carr | paign Financing | _ \$5 | 5.00 May Be | Make | Check Payab | ole to |
| | Signature, types of printed name of registered agent | | paign Financing | _ \$5 | - | Make | DATE | ole to |
| | Signature, type of printed name of registered agent : FILE NOW: FEE IS \$61.25 | 9. Election Cam Trust Fund C | npaign Financing ontribution. | \$5 Ad | 5.00 May Be Ided to Fees | Make Florida | Check Payab Department of | ole to of State |
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indicated on his report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 changed, or on an attachment with an address, with all other like empowered.