

2002 **UNIFORM BUSINESS REPORT (UBR)****FILED**  
**May 15, 2002 8:00 am**  
**Secretary of State**

05-15-2002 90064 046 \*\*\*\*61.25

**DOCUMENT #** 721569

1. Entity Name

Country Acres Auxiliary, Inc.

Principal Place of Business

1850 S. Deleon Avenue  
Titusville, Fl. 32780

Mailing Address

1850 S. Deleon Avenue  
Titusville, Fl. 32780

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number

23-7158373

Applied For

Not Applicable

Zip

32780-4747

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Rushin, Susan  
1850 S. Deleon Avenue  
Titusville, Fl. 32780

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**9. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees**Make Check Payable to:**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME Higginbotham, Tracey C.  
STREET ADDRESS 3935-L N. U.S.1  
CITY-ST-ZIP Cocoa, Fl. 32926TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE SD ☐ Delete  
NAME Hooper, Marilyn S.  
STREET ADDRESS 166 June Drive  
CITY-ST-ZIP Cocoa Beach, Fl. 32931TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE TD ☐ Delete  
NAME Kuntz, Donna M.  
STREET ADDRESS 3700 S. Hopkins  
CITY-ST-ZIP Titusville, Fl. 32780TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE VD ☐ Delete  
NAME Mayhew, Terry  
STREET ADDRESS 3856 Champion Road  
CITY-ST-ZIP Titusville, Fl. 32780TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)