

**FILED**

**DOCUMENT # 722978**

Mailing Address  
PO BOX 1616  
KEY LARGO, FL 33037 US

**DO NOT WRITE IN THIS SPACE**



01272008 No Chg-NP CR2E037 (4/06)

4. FEI Number  
NOT APPLICABLE

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BLAIR, JAMES  
240 TAYLOR DR  
KEY LARGO, FL 33037

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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. I am familiar with, and accept the obligations of registered agent.

**SIGNATURE**

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

(NOTE: Registered Agent signature required when reinstating)

11000079221 20

**Filing Fee Is \$61.25**  
**Due by May 1, 2008**

**9. Election Campaign Financing Trust Fund Contribution.**

**\$5.00** May Be  
Added to Fees

02/19/08-80055-016 61.25

10.	OFFICERS AND DIRECTORS
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TITLE	T
NAME	BLAIR, JAMES
STREET ADDRESS	240 TAYLOR DRIVE
CITY-ST-ZIP	KEY LARGO, FL 33037

TITLE	VP
NAME	BARSIMANTOV, GEORGE
STREET ADDRESS	271 RYAN AVE
CITY-ST-ZIP	KEY LARGO, FL 33037

TITLE	S
NAME	PERLOFF FREUDLICH, LINDA
STREET ADDRESS	314 LOEB AVENUE
CITY - ST - ZIP	KEY LARGO, FL 33037

TITLE	D
NAME	MAREK, CHRIS
STREET ADDRESS	304 KING AVE
CITY-ST-ZIP	KEY LARGO, FL 33037

TITLE	P
NAME	DONOVAN, DAN
STREET ADDRESS	265 LEE AVE
CITY - ST - ZIP	KEY LARGO, FL 33037

TITLE	D
NAME	PINO, RAY
STREET ADDRESS	309 LANCE LANE
CITY - ST - ZIP	KEY LARGO, FL 33037

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

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Daytime Phone: \_\_\_\_\_