FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 20, 2001 8:00 am DOCUMENT # 723236 **Secretary of State** 1. Entity Name 07-20-2001 90001 009 ****70.00 BROOKSVILLE CADA-HADDON CHAPTER 67 DISABLED AMER Principal Place of Business Mailing Address 16314 CORTEZ BLVD P O BOX 10069 P.O. BOX 10069 P.O. BOX 10069 **BROOKSVILLE FL 34601** BROOK\$VILLE FL 34603-0069 2. Principal Place of Business 3. Mailing Address P.O. BOX 1006 9 Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE BOVE City & State City & State 4. FEI Number Applied For 59-1941826 BROOKSVILLE, FLORIDA Not Applicable Zin Country \$8.75 Additional 5. Certificate of Status Desired U. SA. 34603-0069 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PITT, JOHN F 6971 PINEHURST DR SPRING HILL FL 34606 City 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 \$5.00 May Be Make Check Payable to Trust Fund Contribution Added to Fees After September 12, 2001, min. will be \$236.25 Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITL F Delete TITLE Change Change ☐ Addition HOUYOU, JOHN R MANGANO, EDWARD NAME NAME 30/0 BATSHORE DRIVE SPRING HILL, FL 34608. STREET ADDRESS 13372 BREWSTER RD STREET ADDRESS CITY-ST-ZIP SPRING HILL FL 34609 CITY-ST-7IP **VPD** TITLE ☐ Addition Delete TITI F MANGAND, EDWARD -13371-BREWSTER ROAD SPRING HILL, FL 34609 DOWNES, HARVEY L NAME, NAME STREET ADDRESS 19479 PEYTON PLACE STREET ADDRESS SPRING HILL, FL CITY-ST-ZIP **BROOKSVILLE FL 34601** CITY-ST-ZIP **VPD** TITLE Delete Change ☐ Addition DOWNES, HARVEY, L LAVERY, JANET NAME NAME 19479 PEYTON PLACE BROOKS VILLE, FL 34601 **508 N AVE W** STREET ADDRESS STREET ADDRESS CITY-ST-7IP **BROOKSVILLE FL 34601** CITY-ST-ZIP S#D- 5 D TITLE ☐ Delete ☐ Change Addition SAME PITT, JOHN NAME NAME 6971 PINEHURST DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP SPRINGHILL FL 34606 CITY-ST-ZIP 2ND VPD. TIT! F Delete TITLE ☐ Change Addition HOUYOU, JOHN R PARKER, JANET NAME NAME GOOL SPRINGHILL DRRIVE SPRINGHILL, FL 34608. 3010 BAYSHORE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SPRING HILL FL 34608 CITY-ST-ZIP TITLE TREASURER ☐ Delete TITLE ☐ Change **Addition** SNYDER, HAROLD DEMERS RAYMOND A. 9163 SCEPTER AVE NAME NAME WEEKI WACHEE 9074 HEATHER BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BROOKSVILLE FL 34613** BROOKS VILLE, FLORIDA 34613-4931 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:

LEGINATORDEDUIRRAMOND A

A. DEMERS

352-596-9173