2000 UNIFORM BUSINESS REPORT (UBR)

2/5/00-90044-048-$61.25-$61.25

DOCUMENT # 732794

1. Entity Name

THE ORLANDO JAYCEES, INC.

FILED
00 MAR 14 PM 12:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
POST OFFICE BOX 2047 ORLANDO FL 32802 US	POST OFFICE BOX 2047 ORLANDO FL 32802-2047 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-0385542 ☐ Applied For ☐ Not A...

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

6. Name and Address of Current Registered Agent

KEWLEE, JERRY A
2541 S. SENDOREN BLVD.
ORLANDO FL 32822

7. Name and Address of New Registered Agent

Name ROBERT W. MOORE
Street Address (P.O. Box Number is Not Acceptable) 4630 S. KIRKMAN RD. #108
City ORLANDO FL Zip Code 32811

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] 2000 President
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICHBURGH, RICH 899 37TH ST. ORLANDO FL	☑ Delete	D ROB MOORE 4630 S. KIRKMAN RD #108 ORLANDO, FL 32811	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~ Change to D KERLEE, JERRY A 2541 S. SEMORAN BLVD. 1712 ORLANDO FL	☐ ~~Delete~~ Change	D ROBIN GRUNWELL 6225 WESTGATE DR #709 ORLANDO, FL 32835	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PERKEY, LINDA 2837 KINNON DR. ORLANDO FL	☑ Delete	~~V~~ DISREGARDED ~~ROBIN RACHAL~~ ~~12614 GROVEVIEW WAY~~ WRONG ADDRESS ~~SANFORD, FL 32773~~ SEE BELOW	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT FREUND, JOEL K 320 RIVERCHASE DR. ORLANDO FL 32807	☑ Delete	D NANCY COOK 12614 GROVEVIEW WAY SANFORD, FL 32773	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V	☐ Delete	D MICHELE FLEMING 3334 BISHOP PARK DRIVE #516 WINTER PARK, FL 32792	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AMELIA HARRISON 948 VINERIDGE RUN #303 ALAMONTE SPRINGS, FL 32714	☐ ~~Delete~~ ADDITION	RD ROBIN RACHAL 508 RIDGEWOOD ST. ALAMONTE SPRINGS, FL 32701	☐ Change ☑ Addition

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 REQUIRED 1-20-00 (407) 620-8693
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #