

FILED
Feb 06, 2006 08:00 AM
Secretary of State

1. Entity Name

Making Address

P.O. BOX 40031
SARASOTA FL 34242
US

3. Mailing Address

Suite, Apt. #, etc.

City & State

Country

Zip

Country

4. FEI Number

NO-T APPLICABLE

Applied Far

Not Applicable.

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

7. Name and Address of New Registered Agent

Name _____

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

City

FL

Zip Code

SIGNATURE

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

(NOTE: Registered Agent signature required when certifying)

DA)E

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
-----	---

☐ Delete☐ Change ☐ Additive☐ Delete☐ Change ☐ Add new...

 Delete

☐ Change ☐ Arriba

 Delete

☐ Change ☐ Action☐ Delete☐ Change ☐ Add...☐ Delete☐ Change ☐ Add:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: George S. ... 10 Jan