2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment

SIGNATURE:

FILED Jan 30, 2002 8:00 am Secretary of State **DOCUMENT # 748129** 1. Entity Name CENTRAL FLORIDA HISTORICAL RAILROAD MODELERS.INC 01-30-2002 90030 047 ****61.25 Principal Place of Business Mailing Address 2090 N FORSYTHE RD 2090 N FORSYTHE RD STE 211 ORLANDO FL 32907 ORLANDO FL 32907 U\$ 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2246286 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HARRIS Street Address (P.O. Box Number is Not Acceptable) LIVINGSTON, BUSSELL W 5506 R. D. AVENUE ORLANDO FL 92822 DELETE CAROLINA ST <u> 2</u>765 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. 1-14-2002 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE PD ☐ Delete (6) TITLE Change NAME PERRY, ERNEST NAME STREET ADDRESS STREET ADDRESS 12720 FORESTEDGE CIRCLE CITY-ST-ZIP CITY-ST-ZIP Orlando fl 32828 ۷D **Delete** TITLE ☐ Addition EE KEAGLE 125 DRAGE DRIVE NAME HANF, DON NAME STREET ADDRESS STREET ADDRESS 3131 CARISUDO COURT CITY-ST-ZIP APOPKA.FL ZZ8ZZ CITY-ST-ZIP ORLANDO FL 32812 TITLE SD Delete TITLE SD Change ☐ Addition NAME HARRIS, PARUL ERIC HENCH 1082 CONDOR PLACE NAME STREET ADDRESS 9972 CAROLINA STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OVIEDO FL 32765 WINTER SPRINGS FL 32708 TITLE **™** Delete Change ☐ Addition PAUL HARRIS NAME Livingston, Russ W 9972 CAROLINA ST STREET ADDRESS 5506 R.D. AVENUE STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32809 CITY-ST-ZIP OVIEDO FL 32765 ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

HARRIS