2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#752673

FILED May 01, 2003 Secretary of State

Entity Name: THE GREATER WASHINGTON SHORES AREA ASSOCIATION OF ORLANDO, INC.

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
	JMBIA STREE), FL 32805	ET US			
Current Mailing Address:			New Mailin	New Mailing Address:	
	JMBIA STREE), FL 32805	ET US			
FEI Number:	59-2539086	FEI Number Applied For()	FEI Number Not Appli	cable () Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:	
3811 COLL	AUTHUR J JMBIA STREE), FL 32805	ET US			
	named entity e of Florida.	submits this statement for the	purpose of changing it	s registered office or registered agent, or both,	
SIGNATUF					
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICERS	S AND DIREC	TORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD (JACKSON, DA 3405 ROGERS ORLANDO, FL	DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Name: Address:	VPD (THOMAS, EZZ 929 WOODEN ORLANDO, FL	BLVD.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	THOMAS, EZZ 929 WOODEN ORLANDO, FL	IE BLVD. 32805) Delete TER J BA STREET	Name: Address:	() Change () Addition () Change () Addition	
Name: Address: City-St-Zip: Title: Name: Address:	THOMAS, EZZ 929 WOODEN ORLANDO, FL TD (ARTHUR, CAR 3811 COLUME ORLANDO, FL	IE BLVD. 32805) Delete TER J BIA STREET 32805) Delete ARY BLVD	Name: Address: City-St-Zip: Title: Name: Address:		
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	THOMAS, EZZ 929 WOODEN ORLANDO, FL TD (ARTHUR, CAR 3811 COLUME ORLANDO, FL VPD (MAXWELL, M/ 1425 BRUTON ORLANDO, FL	IE BLVD. 32805) Delete TER J BIA STREET 32805) Delete ARY BLVD 32805) Delete TTA A B DR	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	()Change()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID RUCKER PD 05/01/2003