2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 757493

1. Entity Name

EUSTIS	AGUE, INC.			03-10-2003 90093 021 ****61.25							
			P.O. BOX 1100 EUSTIS FL 32727-8100	OLFLINKS AND KURT STREET O. BOX 1100 USTIS FL 32727-8100		LIANGI INNA A	(III HARI) AIRIG MUKA	8. 1511 818 11 1			
2. Principa	Place of Busir	ness	3. Mailing Address								
Suite, Ap	ot. #, etc.		2310 S. Bo Suite, Apt. #, etc.	zy Sire	ect		CHECK HERE	IF MAKIN	IG CHANGE	S	
City & St	ate	· · · · · · · · · · · · · · · · · · ·	City & State Fush's FI	City & State		4. FEI Number 59-2114379				Applied For	
Zip	•	=Country =	32726	Country-		5. Certificate of St	atus Desired		\$8.75 Ac		
	6. Name	and Address of Curren	it Registered Agent	- 0,01,1		7. Name and Add	rose of New P	ngiatoroa	•	-	
				Name	,	End Add	VOO OI NEW KI	-Aisieie(Ayent		
WEISS, DAVID L 2310 S. BAY ST.					Street Address (P.O. Box Number is Not Acceptable)						
EUSTIS	FL 32726					-				-	
				City				FI	Zip Cod	de	
8. The abov	e named entity	submits this statement t	for the purpose of changing its re	egistered office	or rogintoro	dogget or bath in	h = 01-1 (F1				
the obliga	ations of registe	ered agent.	and perpendicular straining to the	ogiotorea omeg	or registere	d agent, or both, in	rie State of Flor	rda. Iam	tamiliar with	, and accept	
SIGNATURE		or printed name of registered agen	it and title if applicable (NOTE	Registered Agent sign	oturo rominadi.						
			(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- again or or Agont aign	atore required v	when reinstating)		DATE			
FILE NOW: FEE IS \$61.25 9. Election Campaig Trust Fund Contril					`	\$5.00 May Be	Mak	e Chec	k Payable	to	
			Irust Fulla Co	ilitibution.	Ц,	Added to Fees	Florida	a Depa	rtment of	State	
10.		OFFICERS AND DI	IRECTORS	11.		DDITIONS/CHANGE	S TO OFFICE	C AND D	IDEOTODO IA	140	
TITLE	VPD		Delete	TITLE	TVPD	DOTTONS/CHANGE	S TO OFFICER	S AND U			
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STREET ADDRESS		E YALE DR.		STREET ADDRESS	100	n Lucro	1			i	
CITY-ST-ZIP		AND FL 32726		CITY-ST-ZIP				el.			
TITLE	P				MAN	tilla, FL	3278	<u> </u>			
NAME	CLEMENTS	KATHY	☐ Delete	TITLE					Change	Addition	
STREET ADDRESS	,	, IVIIII R LN————————————————————————————————————		NAME	1						
CITY-ST-ZIP	EUSTIS FL			≈STREET.ADDRESS CITY-ST-ZIP				-		- 1	
TITLE	TD	02120					_				
NAME	WEISS, DAY	ו מוע	Delete	TITLE .	TO	· Alauton			Change	Addition	
STREET ADDRESS	1			NAME	Terr	· Claytor , watervieu	Dr			-	
CITY-ST-ZIP	1	RESS BLVD		STREET ADDRESS	2645	, water via					
	+ 	RA FL 32757		CITY-ST-ZIP	Eusti	5, FL 32	726				
TITLE	SD	ITAMIETO	☐ Delete	TITLE		•			☐ Change	☐ Addition	
IAME	BOWERS, J			NAME					•	_	
TREET ADDRESS		SHALL ROAD		STREET ADDRESS							
CITY-ST-ZIP	EUSTIS FL	32/36		CITY-ST-ZIP							
ITLE			☐ Delete	TITLE					Change	☐ Addition	
IAME				NAME							
TREET ADDRESS				STREET ADDRESS		•					
ity-st-zip				CITY-ST-ZIP							
ITLE			☐ Delete	TITLE	 	<u></u>		 -	☐ Change	☐ Addition	
TILL											

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 trusted 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.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.3-03 352-406.9786

FILED

Mar 10, 2003 8:00 am § Secretary of State

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