| BUSINESS REPORT (UBR) | FILED | | | |
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| 755 | Jan 16, 2002 8:00 am | | | |

2002 UNIFORM

ODESSA FL 33556

| 1. Entity Nam | MENT # 767755 | | | | | 16, 200 cretary | | |
|--|---|---|--|------------------------------------|--|--|--|---------------------------------------|
| | Suncoast Chapter of th Tion, inc. | e retired officers | A | | | 16-2002 90014 | | |
| Principal Plac | e of Business | Mailing Address | | | | | | |
| Verna Weber Po Box 854 Port Richey | | PO BOX 854 PT RICHEY FL 34673-0854 US | | | F1814 \$4834 1 4 | II K ar ii A fric i Osko [†] Osko dio | II BIBSI BIBIK BIBSI BII | |
| PORT | Place of Business KICHEY, FL | 3. Mailing Address P.O. Box | 854 | | | | | |
| Suite, Apt. | . Box 854 | Suite, Apt. #, etc. | | | | DO NOT WRITE IN T | HIS SPACE | |
| City & Stat | | City & State) PORT KICHEY | FL | | 4. FEI Number 59 | -2277756 | | pplied For ot Applicable |
| Zip 94673-0 | Country | 34673-0641 | Country PASCO | - | 5. Certificate of Sta | atus Desired | \$8.75 Ad Fee Require | ditional |
| | 6. Name and Address of Current | Registered Agent | Name | _ | 7. Name and Addi | ress of New Registe | red Agent | |
| | | | | ddraes (l | O. Box Number is N | lot Accentable) | | |
| | ERNA | | - Sileel Al | ndiese (i | E.O. BOX INGILIDE: 15 19 | or Acceptable) | | |
| | T RICHEY FL 34652 | | | | | | | |
| 7.2 | | | City | | | | FL Zip Cor | de |
| 8. The above | named entity submits this statement fo | r the purpose of changing its re | egistered office or | register | ed agent, or both, in | the state of Florida. | | |
| | | | | | | | | |
| SIGNATURE | | | | | | | | |
| | Signature, typed or printed name of registered agent | and title if applicable. (NOTE: | Registered Agent signatu | ure required | when reinstating) | | MATE | |
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| I | | 9. Election Cami | paign Financing | | \$5.00 May Bo | Make C | heck Pavable | to |
| | FILE NOW: FEE IS \$61.25 | 9. Election Camp Trust Fund Co | | | \$5.00 May Be Added to Fees | | heck Payable tment of Stat | |
| 6 | | Trust Fund Co | ontribution. | | Added to Fees | Depar | tment of Stat | e |
| 10. | OFFICERS AND DIE | Trust Fund Co | ontribution. | | Added to Fees ADDITIONS/CHANGE | Depar | tment of Stat | e |
| | | Trust Fund Co | 11. TITLE NAME | PD HA | Added to Fees ADDITIONS/CHANGE | Depar ES TO OFFICERS AN | tment of Stat | e N 10 |
| 10. TITLE NAME STREET ADDRESS | OFFICERS AND DIF PD HARLEY, GRACE 7401 CASCADE DR | Trust Fund Co | 11. TITLE NAME STREET ADDRESS | PD HA 38 | Added to Fees ADDITIONS/CHANGE RIROP FR | Depar ES TO OFFICERS AN ED DR | tment of Stat | e √ 10 Æ Addition |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP | OFFICERS AND DIF PD HARLEY, GRACE 7401 CASCADE DR HUDSON FL 34667 | Trust Fund Co | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD HA 380 | Added to Fees ADDITIONS/CHANGE RROP FR 65 PLAYER FORT RICHEY | Depar ES TO OFFICERS AN ED DR 7, FL - 34 | tment of Stat ID DIRECTORS II Change | e N 10 |
| 10. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE | OFFICERS AND DIF PD HARLEY, GRACE 7401 CASCADE DR HUDSON FL 34667 VPD | Trust Fund Co | 11. TITLE NAME STREET ADDRESS | PD HA 380 | Added to Fees ADDITIONS/CHANGE RROP FR 65 PLAYER FORT RICHEY | Depar ES TO OFFICERS AN ED DR 7, FL - 34 | tment of Stat ID DIRECTORS II Change | e N 10 ∑ Addition |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP | OFFICERS AND DIF PD HARLEY, GRACE 7401 CASCADE DR HUDSON FL 34667 | Trust Fund Co | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | PD HA 380 NEW VP BR | Added to Fees ADDITIONS/CHANGE RROP FR 65 PLAYER PORT RICHET D ERTON FRA | Depar ESTO OFFICERS AN ED DR , FL - 34 NC15 J BEAR LOG | tment of Stat D DIRECTORS II Change Change | e N 10 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | OFFICERS AND DIF PD HARLEY, GRACE 7401 CASCADE DR HUDSON FL 34667 VPD GRACE, HARLEY | Trust Fund Co | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | PD HA 380 NEW VP BR | Added to Fees ADDITIONS/CHANGE RICOP FR G5 PLAYER PORT RICHET | Depar ESTO OFFICERS AN ED DR , FL - 34 NC15 J BEAR LOG | tment of Stat Change Change | N 10 Addition Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | OFFICERS AND DIF PD HARLEY, GRACE 7401 CASCADE DR HUDSON FL 34667 VPD GRACE, HARLEY 7401 CASCADE DR HUDSON FL 34667 SD | Trust Fund Co | TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE | PD HA 380 NEW VP BR | Added to Fees ADDITIONS/CHANGE RROP FR 65 PLAYER PORT RICHET D ERTON FRA | Depar ESTO OFFICERS AN ED DR , FL - 34 NC15 J BEAR LOG | tment of Stat D DIRECTORS II Change Change | e N 10 |
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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: