2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

F01000006243 DOCUMENT

1. Entity Name

COLMENA CORP. OF DELAWARE



FILED Feb 07, 2003 8:00 am Secretary of State 02-07-2003 90066 005 ***150.00

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Principal Place of Business 2500 NORTH MILITARY TRAIL STE 225 BOCA RATON FL 33431		Mailing Address 5185 SE 20TH STREET OCALA FL 34471								
2. Principal Place of Business		3. Mailing Address			1 	8844 88 44 8844 8 44 8 14				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State		City & State		4.	4. FEI Number 54-1778587 Applied For Not Applicable					
Zip	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 / Fee Regu	Additional			
	6. Name and Address of Current	Registered Agent		7.	Name and Address of New Re					
LINDSEY	VANESSA H	- See Name								
	20TH STREET		Street A	Address (P.O. E	Box Number is Not Acceptable)					
OCALA FI	_ 34471				. <u> </u>	- · · · · · · · · · · · · · · · · · · ·				
			City	· · ·		FL Zip C	ode			
8. The above the obliga	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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE	1									
*	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	Registered Agent signa	iture required when re	einstating)	DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					Election Campaign Finar Trust Fund Contribution.	~ <u>~</u> ~~	.00 May Be led to Fees			
10.	OFFICERS AND I	DIRECTORS	11.	AD	L DITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	DRS IN 11			
TITLE	PD	Delete	TITLE	D		X Chang	e 🔲 Addition			
NAME DMYTRYK, EDWARD C STREET ADDRESS 2500 NORTH MILITARY TRAIL, STE 225			NAME STREET ADDRESS	Dmytryk, Edward C 2500 North Military Trail, Ste 225						
CITY-ST-ZIP	BOCA RATON FL		CITY-ST-ZIP		aton, Fl	IIaII, S	te 225			
TITLE NAME	CD Joffe, anthony Q	☐ Delete	TITLE NAME	PCD	•	🔀 Change	Addition (
STREET ADDRESS CITY-ST-ZIP	2500 NORTH MILITARY TRAIL, STI BOCA RATON FL	E 225	STREET ADDRESS CITY-ST-ZIP	2500 N	Anthony Q orth Military	Trail, S	te 225			
TITLE	D	☐ Delete	TITLE	Boca R D	aton, Fl	Change	Addition			
NAME STREET ADDRESS	CHAMPION JR, CHARLES J	NAME	G. Richard Chamberlin							
CITY-ST-ZIP	2500 NORTH MILITARY TRAIL, STI BOCA RATON FL	E 220	STREET ADDRESS CITY-ST-ZIP	5185 S Ocala,	E 20th St. F1 34471		-,			
TITLE	D	☐ Delete	TITLE			☐ Change				
NAME STREET ADDRESS	GIGLIOTTI, ROBERT S 2500 NORTH MILITARY TRAIL, STI	F 225	NAME STREET ADDRESS							
CITY-ST-ZIP	BOCA RATON FL		CITY-ST-ZIP							
TITLE NAME	D VAN ETTEN LAW/DENICE	☐ Delete	TITLE			☐ Change	Addition			
NAME VAN ETTEN, LAWRENCE STREET ADDRESS 2500 NORTH MILITARY TRAIL, STE 225			NAME STREET ADDRESS							
CITY-ST-ZIP	BOCA RATON FL 33431	-	CITY-ST-ZIP							
TITLE NAME	VSD LINDSEY, VANESSA H	☐ Delete	TITLE			☐ Change	☐ Addition			
	5185 SE 20TH STREET -	- m	NAME STREET ADDRESS							
CITY-ST-ZIP	OCALA FL 34471		CITY-ST-ZIP							

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 607, 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: