2003 FOR PROFIT CORPORATION

DOCUMENT



FILED Feb 18, 2003 8:00 am Secretary of State

1. Entity Na	RECORDS CONTROL OF FLO	ORIDÁ, INC.	90			02-18-2003 90090	022 ***150).00	
	ace of Business RAINES ROAD IN 38118	Mailing Address 4011 EAST RAINES ROAD MEMPHIS TN 38118				1 (88) (88) (1) (88) (8 (1) (8) (1) (8) (1)			
	Place of Business Michigan Ave	3. Mailing Ad	dress						
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.			\dashv	CHECK HERE IF MAKING CHANGES			
City & St.	- Muers - Florida	City & State			4 . F	El Number 41-2067833		Applied For	
Zip 33		Zîp		intry	5. C	Certificate of Status Desired		dditional	
	6. Name and Address of Current	Registered Ager	nt		7. N	ame and Address of New Registere		-	
55 5				Name					
PALO, DANNY 4075 EDISON AVENUE				Street Address (P.O. Box Number is Not Acceptable)					
FORT M	YERS FL 33916			City					
						F	Zip Cod		
SIGNATURE	Signature, typed or printed name of registered agent a	- Da	nny Palo		utiv.	e Vice-Presiden	+	and accept	
Afte Make Chec	FILE NOW!!! FEE IS \$150.00 er May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of				-	9. Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees	
10.	OFFICERS AND		11.		ADD	ITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD BELZ, JACK 100 PEABODY PLACE, SUITE 140 MEMPHIS TN 38103						☐ Change	☐ Addition	
TITLE NAME	V PALO, DANNY		Delete Titl NAM	·	3 ., :		☐ Change	☐ Addition	
STREET ADDRESS City-St-Zip	4011 EAST RAINES ROAD MEMPHIS TN 38118			ET ADDRESS - ST_ZIP	•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WILLIAMS, JIMMIE D 100 PEABODY PLACE, SUITE 140 MEMPHIS TN 38103						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, CECIL 855 RIDGE LAKE BLVD. MEMPHIS TN 38119			I .			☐ Change	☐ Addition	
TITLE VAME STREET ADDRESS CITY-ST-ZIP	D PETTY, RUSS 868 MT. MORIAH MEMPHIS TN 38117		NAME STREE				☐ Change	Addition	
ITLE IAME TREET ADDRESS ITY-ST-ZIP			NAME STREE				☐ Change	Addition	
2. I hereby c	ertify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empower or on an attachment with an address, with	nis filing does not ue and accurate ered to execute the	qualify for the exer	nption stated in S	Section 119 same leg 07, Florida	9.07(3)(i), Florida Statutes. I further cer al effect as if made under oath; that I Statutes; and that my name appears i	rtify that the inf am an officer c in Block 10 or f	iormation or director Block 11 if	

SIGNATURE: