in the same	,		
2000 UNIFORM	<b>BUSINESS</b>	REPORT	(UBR)

			_ ,	·- <b>,</b>		
	MENT # F2937	3	<del>.</del>			
1. Entity Name Blakely, Ward Stuckey of Florida, Inc.			FILED			
	•			1		
Principal Place of Business Mailing Address			00 DEC 18 PM 3: 26			
	2641 E. Atlantic Blvd Ste. 201	•		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Pompano Beach, FL 30062			TOURIDA			
Principal Place of Business     3. Mailing Address						
Suite. Apt.	#. etc	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State				4FEt Number   Applied For		
		City & State		59-211-0651 Not Applicable		
Zip	Country	Zio	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent Name		
	Mark Tatum 2771 N <b>E</b> 57th Street		Street A	Street Address (P.O. Box Number is Not Acceptable)		
. 1	Ft. Lauderdale, FL 33	308				
			City	FL Zip Code		
8. The apove	named entity submits this statement for	the purpose of changing its reg	istered office or	r registered agent, or both, in the State of Florida.		
SIGNATURE .						
SIGITATION E	Signature, typical or bruned name or registered agent at	Variable State of the Control of the	. 5 × ,	ure required when reinstance DATE .		
<ul> <li>Tax-filing.re</li> </ul>	oration is eligible to satisfy its Intangible equirement and elects to do so.	After MAY 1, 2000,	Fee will be \$5	10. Election Campaign Financing \$5.00 May Be		
. (See criter	ria on back)	Make Check Payable	to Departmen	it of State (CA)		
11.	OFFICERS AND E	_	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IM 11		
TITLE NAME	PRESIDENT	☐ Delete	TITLE	Vice President George Vitale 2641 E. Atlantic Blvd. #201		
STREET ADDRESS	MARK C. TATUM			2641 E. Atlantic Blvd. #201		
CITY-ST-ZIP				Pompano Beach, Fl 33062		
TITLE ':	FI. LAUDERDALE, FL		TITLE	Change Adoition		
NAME			HAME	,		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	·		
TITLE NAME		☐ Delete	TITLE	Change Adonies		
STREET ADDRESS			STREET ADDRESS	6000035147861 -12/27/0001077006		
CITY-ST-ZIP			CITY-ST-ZIP	******61.25 *****61.25		
TITLE	,	☐ Delete	TITLE	Change Addinon		
NAME	<u> -</u> .		HAME			
STREET ADDRESS CITY-ST-ZIP	,		STREET ADDRESS CITY-ST-ZIP			
TITLE		☐ Delete	TITLE	Change Addition		
NAME			NAME			
- STREET ADDRESS		<del>5.</del> *	STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE NAME		☐ Delete	TITLE NAME	Change Addition		
STREET ADDRESS			STREET ADDRESS	1 /U(MM)		
CITY-ST-ZIP	",		CITY-ST-ZIP	0 0.00		
13. 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 11 or Block 12 if						
cnanged,	or on an attachment with an address, w	ith all other like empowered.				
SIGNAT	URE: Male	Leter	Mark	Tatum 11/17/00		
		UNTED NAME OF SIGNING OFFICER OR C	DIRECTOR	Date Dayline Phone #		
·						