FILED Apr 17, 2001 8:00 am Secretary of State

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F57661							04-17-2	2001 901	65 023	***150.00
	Orlando Time									
Principal Pla	ce of Business	Mailing Address	/	,						
595 W	. Granada Blvd.	595 W. Gran	ıada	B1vc	l.					
Suite A Suite A							05122	8		
Ormon	h F	L 321	74	1	n o .	DOIME				
2. Principal Place of Business 3. Mailing Address										
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Sta	ate	City & State				4. FE! Number Applied For				
				50 0061010			lot Applicable			
Zip	Country	Zip	Country			5. Certificate of	of Status Desired		8.75 A	
	6. Name and Address of Current Registered Agent					7. Name and	Address of New R		ee Requi	ea
Sweet	, Jēffrey C.		Name	,	A Maria and Hospitan at Hospitan Maria					
ľ		Street	Address	(P.O. Box Number	is Not Acceptable	<u> </u>				
595 W. Granada Blvd Suite A						Tr. C. Box Homber		<u>,</u>		
	1 Beach, FL 32174									
	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			City		· · · · · · · · · · · · · · · · · · ·		FL	Zip Co	de
8 The above	e named entity submits this statement for	the number of changing its	enister	ad office o	r toniete	ered soent or both	in the State of Flo		L	
("	s harried drilling additions that statement for	trie pulpose of changing its i	ėgisteri	o Ollice C	· registe		, III the State of Fig.	ilua,		·· ·· ·· · · · · ·
SIGNATURE	Signature, typed or printed name of registered agent ar	d title if applicable. (NOTE:	1 Registere	d Agent signa	ture require	od when reinstating)		DATE	NART.	
9. This corpo	oration is eligible to satisfy its Intangible	FILE NOW!	FEE	IS \$150	DO S	40 5100	tian Compaign Eig	000:	**	00
Tax filing i	requirement and elects to do so.	After MAY 1, 200	1.100	will be \$	550.0Q	True	tion Campaign Fin t Fund Contribution			DO May Be d to Fees
	ria on back)	Make Check Payabi	ALC: NO	partmet	t of 80	Act abstract or			··-	
11.	OFFICERS AND C	Delete	12.		-	ADDITIONS/C	HANGES TO OFFI		☐ Change	IS IN 11
TITLE NAME	VD White, O.L.		NAM					,	Criange	C Addition
STREET ADDRESS	3555 S. Atlantic Ave.			ET ADORESS	ł					13
CITY-ST-ZIP	Daytona Bch Shores, FL			ST-ZIP	<u> </u>					Addition
TITLE .	DP Detete							(☐ Change	☐ Addition ģ
NAME STREET ADDRESS	Verkaik, Robert			ET ADDRESS						1
CITY-ST-ZIP	ry.st.70 2777 Poinciana Blvd.									
TITLE	Kissimmee, FL	TITLE				·		Change	Addition	
NAME	Zoch, Lori R.	NAMI		-	-		•			
STREET ADDRESS CITY-ST-ZIP	•			ET ADDRESS - ST - ZIP						
TITLE	JP 595 W. Granada Blvd., Suite A Urmond Beach, FL 32174 □ Delete				-	·			Change	Addition
HAME		L Delete	MAKE							_ Advisor }
STREET ADDRESS			•	ET ADDRESS]				•	}
CITY-ST-ZIP			CITY	ST-ZIP				 ,		
TITLE		☐ Delete	IITLE					[Change	Addition
NAME STREET ADDRESS		****	NAMI STRE	T ADORESS]					
CITY-ST-ZIP		TT SEC. AL		ST-ZIP				٠		
TITLE .	The grant or con-	☐ Delete	TITLE				Grand Commence	_{, [}	Change	Addition
NAME -11	Structure of the property of the		NAME			, · · ·	to all the	National Control	•	·*, · · · · · ·
STREET ADDRESS	the trade of the new many	شخبس ^ا بست کیم شخب د پ ورزان		T ADORESS ST-ZIP						
	certify that the information supplied with the	his filling does not qualify for t	-		ted in S	ection 119.07(3)(i)	Florida Statutes 1	further certify	that the	information
indicatéd	on this report or supplemental report is to poration or the receiver or trustee empowers.	rue and accurate and that my	signat	ure shall h	ave the	same legal effect a	as if made under o	ath; that I am	an office	or director
changed,	poration or the receiver or trustee empow , or on an attachment with an address, wi	th all other like empowered.	a reduit	ea by Offic	pier OU	i, i ivilua statutes;		aphegis iii c	MOUNT I I	- DIOCK 12 II
CICNIT	TIPE.	(_ l	/	~ p '	2 -	Zoch	4-11-71	Qui	1-177	2421
SIGNAT		INTED NAME OF SIGNING OFFICER OF	DIRECT	<u>ひ/こ</u> (<u> </u>	-U	Date	Day	rnc Phone i	<u> </u>
		() — —					<u></u>		_	