2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

F60978

DOCUMENT # F60978

1. Entity Name
BARNIE'S COFFEE & TEA COMPANY, INC.

FILED
03 FEB 10 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-21-03 90070 020 # 150.00

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
7001 LAKE ELLENOR DR. #250 ORLANDO FL 32809	7001 LAKE ELLENOR DR. #250 ORLANDO FL 32809

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2193659 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FIELDSTONE, RONALD 201 ALHAMBRA CIRLCE SUITE 601 CORAL GABLES FL 33134	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCEO UNGARO, RICHARD 7001 LAKE EKENOR DR STE 250 ORLANDO FL 32809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/COO UNGARO, RICHARD 7001 LAKE ELLENOR DRIVE, STE 250 ORLANDO, FL 32809	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCFO LEGLER, CHRISTOPHER 7001 LAKE ELLENOR DR., SUITE 250 ORLANDO FL 32809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FIELDSTONE, RONALD 201 ALHAMBRA CIRCLE, SUITE 601 CORAL GABLES, FL 33134	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FIELDSTONE, MICHAEL 5200 TOWN CENTER CIR., SUITE 470 BOCA RATON FL 33486	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/CEO LEACH, NEIL E. 2 OCEAN CLUB DRIVE AMELIA ISLAND, FL 32034	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SDVP FIELDSTONE, RONALD 201 ALHAMBRA CIRLCE, SUITE 601 CORAL GABLES FL 33134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/EVP KALAFUT, BOB 7001 LAKE ELLENOR DRIVE, SUITE 250 ORLANDO, FL 32809	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C LEACH, NEIL E 2 OCEAN CLUB DRIVE AMELIA ISLAND FL 32034	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/VP DAIGLE, MICHAEL 7001 LAKE ELLENOR DRIVE, SUITE 250 ORLANDO, FL 32809	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KALAFUT, BOB 23099 SUNFIELD DRIVE BOCA RATON FL 33433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LEACH, GLORIAN 7001 LAKE ELLENOR DRIVE, SUITE 250 ORLANDO, FL 32809	☐ Change ☒ Addition

CR2E034 (10/02)

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: SIGNATURE MICHAEL L. DAIGLE 1/3/03 407 854-6628
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR V.P. Date Daytime Phone #