

FILED
May 21, 2003 8:00 am
Secretary of State

05-21-2003 90192 008 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

80120543

DOCUMENT # G62628			
1. Entity Name DAVIE LEDBETTER, INC.			
Principal Place of Business % DAVIE F. LEDBETTER 2400 EAST OAKLAND PARK BOULEVARD FT. LAUDERDALE, FL 33306		Mailing Address % DAVIE F. LEDBETTER 2400 EAST OAKLAND PARK BOULEVARD FT. LAUDERDALE, FL 33306	
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 59-2327141		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEDBETTER, DAVIE F. 2400 EAST OAKLAND PARK BOULEVARD FT. LAUDERDALE, FL 33306		7. Name and Address of New Registered Agent 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 _____ DATE _____ (NOTE: Registered Agent's signature required when submitting)			
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fee			
10. OFFICERS AND DIRECTORS			
TITLE	OP	☐ Delete	
NAME	LEDBETTER, DAVIE F		
STREET ADDRESS	2900 BANYAN BV CR NW		
CITY-ST-ZIP	BOCA RATON, FL		
TITLE	D	☐ Delete	
NAME	LEDBETTER, SUSAN L.		
STREET ADDRESS	2900 BANYAN BV CR N.W.		
CITY-ST-ZIP	BOCA RATON, FL		
TITLE		☐ Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE		☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
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: <i>David F. Ledbetter</i>		5/19/03 954-275-4404	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

CR2E034 (10/02)