## 2002 UNIFORM BUSINESŞ REPORT (UBR)

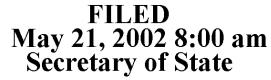
**DOCUMENT #** 1. Entity Name

G81167

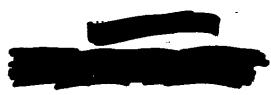
FOUR TOWNES EXECUTIVE CENTER ASSOCIATION, INC.

Principal Place of Business

Mailing Address



04-18-2002 90475 032 \*\*\*150.00



1750 S. VOLUSIA AVE., SUITE 7 ORANGE CITY FL 32763			1750 S. VOLUSIA AVE SUITE 7 ORANGE CITY FL 32763							
2. Principal Place of Business C/O Ken West 3. Mailing Address C/O 1654 Providence Blvd. 1654 Providence Suite, Apt. #, etc. Suite, Apt. #, etc.						- - 1	DO NOT WRITE IN	I THIS SP	ACE	
City & State Deltona, FL			City & State Deltona, FL			1 59-244 1996			pplied For	
Zip Country 32725 USA			Zip 32725	p Country		5. Certificate of Status Desired S8.75 Addition Fee Required				ditional
	6. Name	and Address of Current	Registered Agent			7. N	lame and Address of New Regis	tered Ag	ent	
HARDESTY, ALONZO H., III 1750 S. VOLUSIA AVE., SUITE 7					Name Ken West Street Address	(P.O. B	ox Number is Not Acceptable)			
ORANGE CITY FL 32763					1654 Providence Blvd.  Bëltona FL Zig2					25
SIGNATURE .	Signature, typed	1/1/2/	UNETH T, WEST and we if applicable. (N	NOTE: Registered	Agent signature required  S.\$150.00	ies nedw t	ristating)	8/0°C		
Tax filing requirement and elects to do so. (See criteria on back)			After May 1, 2002 Fee v Make Check Payable to De		ill be \$550.00	te	Trust Fund Contribution.		Added	O May Be to Fees
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECTORS  PT MANCINIK, BILL 899 E. NEW YORK AVE. DELAND FL				ADDRESS Ken 1654	12004 ILOVIDENCE DIVI.				Addition
TITLE VAME STREET ADDRESS CITY-ST-ZIP		Y, ALONZO H., III DLUSIA AVE. #7 CITY FL	☐ Ociate	TITLE Name Street City-S	ADORESS T-ZIP				] Change	☐ Addition
ITTLE  WAME  TREET ADDRESS  ETY-ST-ZIP			Delete	TITLE NAME STREET CITY-ST	ADDRESS	- <del>****</del>	<u> </u>		Change	Addition
ITLE AME Treet address HTY-ST-ZIP			☐ Delete	TITLE NAME	ADDRESS				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET / CITY-ST	ADDRESS - ZIP			С	] Change	Addition
ITLE			☐ Delete	TITLE NAME					Change	Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR