FOR PROFIT CORPORATION: UNIFORM BUSINESS REPORT (UBR) DOCUMENT # H33138.			FILED Apr 02, 2002 8:00 am Secretary of State 04-02-2002 90967 038 ***150.00
T,A,WEEKS & ASSOC	IATES, INC.		
DO NOT WRIT	E IN THIS S	PACE	
2. Principal Place of Business 1815 Thornhill Road	3. Mailing Address 1815 Thornhi	11 Road	B0056863
Suite, Apt. #, etc. Aubumode Let. Fill Soliton 220	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State Auburndale, <u>F1</u>	City & State Auburndale, F	······································	4. FEI Number Applied For 59–2542902 Not Applicable
Zip Country 33823 Polk	Zip 33823	Country Polk	5. Certificate of Status Desired Status Desired Fee Required
		Name	7. Name and Address of Current Registered Agent
DO NOT N		Street Addres	s C. Barton Treasurer s (P.O. Box Number is Not Acceptable)
in this s	PACE		hornhill Road dale, Florida 33823
		City	dale, Florida FL ^{Zip Code} 33823
8. The above named entity submits this statement DOLORE SIGNATURE Signature, typed or printed name of registered a	S C. BARTI C. Beiton	E: Registered Agent signature requi	3/23/02
 This corporation is eligible to satisfy its Intang Tax filing requirement and elects to do so. (See criteria on back) 11. OFFICERS A 	After May	May 1 Fee is \$150.00 1, Fee is \$550.00 d UBR is \$61.25 ble to Department of S	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees tate Image: State
TITLE PD	Difference	TITLE	
Weeks, T.A. STREET ADDRESS Weeks, T.A. STY-ST-ZIP 1815 Thornhill Ro	ad	NAME STREET ADDRESS CITY-ST-ZIP	
Auburridale, Fl 33	823	TITLE	
IAME STREET ADDRESS		NAME STREET ADDRESS	
TTLE Bartons Dalores (CITY-ST-ZIP TITLE	
vame Bârtônî; Dolores C STREET ADDRESS 1815 Thornhill Ro		NAME STREET ADDRESS	
MUSTY-ST-ZIP Auburndale, F1 33	023	CITY-ST-ZIP TITLE	DO NOT WRITE
Barton, C. A.	- d	NAME STREET ADDRESS	IN THIS SPACE
Auburndale, Fl 33		CITY-ST-ZIP	
ITLE		TITLE NAME	
STREET ADDRESS STTY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
ITLE		TITLE	
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
	t is true and accurate and that n		Section 119.07(3)(i), Florida Statutes. I further certify that the information e same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 11 or on an
SIGNATURE:	arton Baton	Secretar	y 863-967-1129 Date Daytime Phone #