2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # H41699

FILED May 19, 2000 8:00 am Secretary of State

CENTRAL FLORIDA PROPERTIES, INC.				05-19-2000 90010 020 ***150.00		
Principal Plac	e of Business	Mailing Address				
Daniel M. Hunter Daniel M. Hur 243 W. Park Ave. 227 W. Park A Winter Park, FL 32789 Winter Park,			rk Ave.	D8052741	3	
2. Principal P	lace of Business	Mailing Address		1		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number 59-1677162	FEI Number Applied For 59-1677162 Not Applicable	
Zip	Country	Zip	Country	5 Certificate of Status Desired	\$8.75 Add Fee Require	
	6. Name and Address of Current R	egistered Agent		7. Name and Address of New Registered A		
Name Name						
Daniel M. Hunter			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
227 W. Park Ave. Winter Park, FL 32789						
WIUT	er Park, FL 32789	•	City	FL	Zip Cod	ie
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office or registe	ered agent, or both, in the State of Florida.	 •	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOWIII FEE IS \$150.00 After MAY 1; 2000 Fee will be \$550.00 Make Check Payable to Department of St				STATE OF THE PROPERTY OF THE P		00 May Be of to Fees
11.	OFFICERS AND D	IRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 11
NAME STREET ADDRESS	DP Hunter, Daniel M. 227 W. Park Ave.	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
CITY-ST-ZIP	Winter Park, FL		TITLE		Change	Addition
NAME		☐ Delete	NAME		C Cuange	Accidion
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CITY-ST-ZIP			CITY-ST-ZIP	·		
TITLE		☐ Delete	TITLE		Change	☐ Addition
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13. I hereby o	ertify that the information supplied with the on this report or supplemental report is to	nis filing does not qualify for thrue and accurate and that my	ne exemption stated in Signature shall have the	Section 119.07(3)(i), Florida Statutes. I further cert e same legal effect as if made under oath; that I a	ify that the in	nformation or director

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Signature and typed on Printed Name of Signature

Daniel M. Hunter

4/24/00

407-647-6900

ate

Daytime Phone #