

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H65443

1. Entity Name

FGE REALTY, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90078 026 ***150.00

00040120



DO NOT WRITE IN THIS SPACE

Principal Place of Business 900 S.R. 434 WINTER SPRINGS FL 32708	Mailing Address 900 S.R. 434 WINTER SPRINGS FL 32708
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2. Principal Place of Business 3595 West Lake Mary Blvd. Suite, Apt. #, etc. Suite A City & State Lake Mary, Florida Zip 32746 Country U.S.	3. Mailing Address 3595 West Lake Mary Blvd. Suite, Apt. #, etc. Suite A City & State Lake Mary, Florida Zip 32746 Country U.S.
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4. FEI Number 07-9389769	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WOOD, DANIEL P. 900 S.R. 434 WINTER SPRINGS FL 32708

7. Name and Address of New Registered Agent Name Wood, Daniel P. Street Address (P.O. Box Number is Not Acceptable) 7750 Apple Tree Circle City Orlando FL Zip Code 32819
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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.

SIGNATURE _____ (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. <input type="checkbox"/> (See criteria on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
<table><tr><td>TITLE</td><td>PD</td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td>WOOD, DANIEL P.</td><td></td></tr><tr><td>STREET ADDRESS</td><td>900 S.R. 434</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>WINTER SPRINGS FL</td><td></td></tr></table>	TITLE	PD	<input type="checkbox"/> Delete	NAME	WOOD, DANIEL P.		STREET ADDRESS	900 S.R. 434		CITY-ST-ZIP	WINTER SPRINGS FL		<table><tr><td>TITLE</td><td>PD</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td>Wood, Daniel P.</td><td></td></tr><tr><td>STREET ADDRESS</td><td>7750 Apple Tree Circle</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>Orlando, Florida 32819</td><td></td></tr></table>	TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Wood, Daniel P.		STREET ADDRESS	7750 Apple Tree Circle		CITY-ST-ZIP	Orlando, Florida 32819	
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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: Daniel P. Wood, President/Director Date: March 21, 2000 Daytime Phone #: 407-363-1475