**FILED** 

## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Mar 06, 2002 8:00 am Secretary of State DOCUMENT # H87324 1. Entity Name 03-06-2002 90009 045 \*\*\*150.00 IDYLLIC, INC. Principal Place of Business Mailing Address 1001 3RD AVE N. P. O. BOX 1251 **BRADENTON FL 34206** STE 700 **BRADENTON FL 34205** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2613185 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CHRISTOPHER, ROBERT E Street Address (P.O. Box Number is Not Acceptable) 1001 3RD AVE, N **BRADENTON FL 34205** Čitv 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition CR2E034 (9/01) TITLE ☐ Delete TITLE ☐ Change EDWARDS, RONALD L. Nº ME NAME 907 BETHEL CREEK DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL' CITY-ST-ZIP TÊE ☐ Delete ☐ Change ☐ Addition TITLE CHRISTOPHER, ROBERT E NAME NAME STREET ADDRESS 3932 RIVERVIEW BLVD, W STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME SMITH, JAN E. TOTAL NAME STREET ADDRESS STREET ADDRESS 1203 62ND STREET, NW CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** TITLE ☐ Delete Change ☐ Addition WEBB, IRA E. NAME NAME STREET ADDRESS 5219 22ND AVENUE WEST STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME ZIGULICH, JOSEPH D. MAME STREET ADDRESS 51 TIDY ISLAND BLVD STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** CITY-ST-ZIP Delete TITLE ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 impowered.

SIGNATURE:

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