

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J09456

FILED
Feb 26, 2002 8:00 AM
Secretary of State

Entity Name: MAROON DEVELOPMENT, INC.

Current Principal Place of Business:

901 DOUGLAS AVE
STE 101
ATAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

901 DOUGLAS AVE
STE 101
ATAMONTE SPRINGS, FL 32714 US

New Mailing Address:

FEI Number: 59-2662993 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAROON, S WILLIAM
901 DOUGLAS AVE, STE 101
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAROON, WILLIAM S.,
Address: 901 DOUGLAS AVE, SUITE 101
City-St-Zip: ALTAMONTE SPRING, FL

Title: D () Delete
Name: MAROON, LOLA,
Address: 901 DOUGLAS AVE, SUITE 101
City-St-Zip: ALTAMONTE SPRINGS, FL

Title: ST () Delete
Name: MAROON, WILLIAM S
Address: 901 DOUGLAS AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL

Title: VP () Delete
Name: HATCHITT, ALAN
Address: 901 DOUGLAS AVE, STE. 101
City-St-Zip: ATAMONTE SPRINGS, FL 32714 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM S. MAROON

PD

02/26/2002

Electronic Signature of Signing Officer or Director

_____ Date