## 2002 Uniform Business Report (UBR)

Principal Pisco of Business 180 IRECUNTE DRIVE ORANGE CITY FL 32768  180 ORECUNTY DRIVE ORANGE CITY FL 32768  180 ORECUNTY STEPS  24 Incopal Pisco of Augments STEPS AND STEPS  25 Incopal Pisco of Augments STEPS AND STEPS  26 Incopal Pisco of Augments STEPS AND STEPS  26 Incopal Pisco of Augments STEPS AND STEPS  27 Incopal Pisco of Augments S	1. Entity Nar	IMENT # J6282 LE INVESTMENT PARTNERS			Secretary 04-05-2002 90002	of State	
Applied For Action Country Service Country Ser	180 TREEMONTE DRIVE 180 TREEMONTE DRIVE						
Signs, April 4 dec. 14.00 Sm. April 4 dec. 14	2 Principal f	Place of Business	3. Hailing Address				
Construction of the Country	301 & Pine St 301 & Pin			2 St			
S. Name and Address of Current Registered Agent  F. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  Name  GRAY, J. CHARLES 201 E PINE STREET  SUITE 1200  GRANDO FI. 28801  6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Forida.  SIGNATURE  By warm yet remote remot disquired signs and show legible.  FL 78 Coding On Polymore Polymore In North Capital Statement for the purpose of changing its registered office or registered agent, or both, in the State of Forida.  SIGNATURE By warm yet remote remot disquired signs and show legible.  FLE NOW!!! FEE IS \$150,00  After May 1, 2002 Fee will be \$50,00  After May 1, 2002 Fee will be \$50,00  And Charles Polymore In North Capital Polymore In North Control In The State of Forida.  The Control In The North Capital Polymore In North Capital Polym				0	DO NOT WRITE IN	THIS SPACE	
GRAY, J. CHARLES 201 E. PINE STREET SUTE 1200 ORLANDO FL 32801  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 Byound submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE Byound submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE Byound submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE Byound submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE Byound submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE Byound submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  SIGNATURE Byound submits registered agent, or both, in the State of Florida.  SIGNATURE Byound submits registered agent, or both, in the State of Florida.  SIGNATURE Byound submits registered agent, or both, in the State of Florida.  SIGNATURE Byound submits registered agent, or both, in the State of Florida.  SIGNATURE Byound submits registered agent, or both, in the State of Florida.  10. Election Campaign Financing St. 50.00 May Be Added to Fees  THE NAME STREET ADDRESS CITY-51-2P  THE NAME STREE				FL	4. FEI Number 59-2803412		
GRAY, J. CHARLES 201 E. PINE STREET SUITE 1200 ORLANDO FI. 32801  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 Forida.  SIGNATURE Supremental printer rane or registered suprement for the purpose of changing its registered office or registered agent, or both, in the State of Forida.  SIGNATURE Supremental printer rane or registered supremental supremental behaviors.  SIGNATURE Supremental printer rane or registered supremental supr	32	801 Country	zi32801coi	untry	5. Certificate of Status Desired		al
GRAY, J. CHARLES 201 E. PINE STREET SUITE 1200 ORLANDO FL 32801  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 Forida.  SIGNATURE Survey of private named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Forida.  SIGNATURE Survey of private named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Forida.  SIGNATURE Survey of private named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Forida.  SIGNATURE Survey of private named agent are too to applied to satisfy its Intangable After May 1, 2002 Fee will be \$550,00 and the May 1, 2002 Fee will be \$550,00		6. Name and Address of Current R	egistered Agent		7. Name and Address of New Regist	ered Agent	
SIGNATURE Surveius by or prime remot of registered agent and the riscoring. (INCTE. Registered Agent signature required when reintabling)  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to os so. Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE MAME SITRET AUBRESS OUTY-51-2IP  Detelle  TITLE  MAME SITRET AUBRESS OUTY-51-2IP  ORIANDO FL	201 E. P SUITE 12 ORLAND	ing street 200 O FL 32801	the nurpose of changing its regist	Suite 1400 Prlando FL 350801			
TITLE MAME STREET ADDRESS CITY-ST-ZIP  TITLE MAME STREET	9. This corpo	Signature, type or printed name of registered agent an oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! FEI After May 1, 2002 Fee Make Check Payable to I	E IS \$150.00 e will be \$550.00	10. Election Campaign Financin	9\$5.00 ма	
NAME STREET ADDRESS (CITY-ST-ZIP)  DVST GRAY J CHARLES OPLANDO FL  Delete  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADD					ADDITIONS/CHANGES TO OFFICERS		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS	GRAY, JOHN C JR 180 TREEMONTE DRIVE	NA ST	ME REET ADDRESS		Change	CR2E034 (9/01)
TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	NAME STREET ADDRESS	GRAY J CHARLES 201 E PINE ST	D A STI	ME Gran	J Charles E Pine St Suite	1400	Addition
NAME STREET ADDRESS CITY-ST-ZIP  TITLE	NAME Street Address		NA STI	LE ME REET ADDRESS			Addition
NAME STREET ADDRESS CITY-ST-ZIP  TITLE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS		, NAI STF	ME REET ADDRESS		☐ Change ☐ /	Addition
NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS		NAI STF	ME EET ADDRESS		☐ Change ☐ /	Addition
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	NAME STREET ADDRESS CITY-ST-ZIP		NAI STF CIT	ME EET ADDRESS Y-ST-ZIP		- · ·	*

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: