## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # J70703** 1. Entity Name

52.26 CORPORATION

Mailing Address Principal Place of Business % ALBERT G. HARTOG 709 EAST COLONIAL DR. % ALBERT G. HARTOG 709 EAST COLONIAL DR. ORLANDO FL 32803 ORLANDO FL 32803-4604

3. Mailing Address 2. Principal Place of Business

## **FILED** May 15, 2000 8:00 am Secretary of State

05-15-2000 90193 019 \*\*\*150.00

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Suite, Apt. #, etc.		Suite, Apt	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State	<u> </u>	City & Sta	City & State			4. FEI Number 59-2812082			plied For
Zip	Country	Zip		Country	5. Certificate	e of Status Desired		8.75 Add	
6. Name and Address of Current Registered Ager			ent		7. Name and	Address of New Reg	jistered Aç	jent	
				Name			-		
HARTOG, RONALD 711 EAST COLONIAL DRIVE ORLANDO FL 32803				Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
URL	ANDO FL 32803			City			FL	Zip Cod	e
3. The above	named entity submits this statem	ent for the purpose o	f changing its reg	istered office or regis	stered agent, or bo	oth, in the State of Floric	 da.		
	·								
SIGNATURE .									
	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE: Res	gistered Agent signature req	uired when reinstating)		DATE		
Tax filing r	oration is eligible to satisfy its Intal equirement and elects to do so. ia on back)	FEE IS \$150.00 Fee will be \$550.0 to Department of \$	10 <sub>Tri</sub>	lection Campaign Finar ust Fund Contribution.	ncing		May Be I to Fees		
11.	OFFICERS	AND DIRECTORS		12.	ADDITIONS	/CHANGES TO OFFIC	ERS AND I	DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HARTOG, ALBERT G. 709 E. COLONIAL DR.	[	Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		-		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ORLANDO FL	[	□ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			i	Change	Addition
TITLE			Defete	TITLE		- 128		☐ Change	☐ Addition
STREET ADDRESS				NAME STREET ADDRESS CITY-ST-ZIP				C. Cuande	
NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP		i	☐ Delete	STREET ADDRESS				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	14		Delete Delete	STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS					☐ Addition☐ Addition☐

changed, or on an attachme

SIGNATURE: