2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

UNIFORM BUSINESS REPORT # J78744



FILED Mar 20, 2003 8:00 am Secretary of State

03-20-2003 90093 030 ***150.00

PURVÍS, IN	IC.				/				
Principal Place of Business % STEPHEN G. SEWELL 907 WEBSTER STREET LEESBURG FL 34748		Mailing Address % STEPHEN G. SEWELL 907 WEBSTER STREET LEESBURG FL 34748							
2. Principal Pla	ace of Business	3. Mailing Address			-	T (1811) P THE COURT COURT INDIVIOUS OF BUILD AND A	, 3 (8)) 0 6 (9:4)	 	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI	Number 59-2818478		olied For. Applicable	
Zip	Country	Zip	Zip Country		5. Cer	5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Curr	ent Registered Agent			7. Nar	ne and Address of New Registered Ag	jent		
	6. Name and Address of Out	Cite Hogicalor - Ige		Name					
SEWELL, S	a and the second		Street Address (P.O. Box Number is Not Acceptable)						
907 WEBS									
LEESBURG FL 34748									
						FL.	Zip Code		
		-t for the purpose of char	nging its register	ed office or regist	tered agen	t, or both, in the State of Florida. I am fa	miliar with, a	and accept	
the obligation	named entity submits this statemer ions of registered againt.	antitor the purpose of the							
	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE: Registere	ed Agent signature requ	ired when reins	tating) DATE			
After	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550	.00				9. Election Campaign Financing Trust Fund Contribution.		May Be to Fees	
Make Check	Payable to Florida Departme		111.		ADD	ITIONS/CHANGES TO OFFICERS AND	DIRECTORS	S IN 11	
10.		AND DIRECTORS				1110/10/01/10/020	Change	Addition	
TITLE	PD	☐ Del	lete NA	1					
NAME	Purvis, elsie lee 12466 Pine Island Dr.			REET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	LEESBURG FL		CIT	Y-ST-ZIP					
	D		lete TIT	LE	-		Change	Addition	
TITLE NAME	PURVIS, RONALD G.			ME					
STREET ADDRESS	THE PART OF THE PA			REET ADDRESS					
CITY-ST-ZIP	LEESBURG FL		CIT	Y-ST-ZIP			Change	Addition	
TITLE		☐ De		L			[] Change		
NAME				ME DEET ADDRESS		The second secon	·		
STREET ADDRESS	450 - 0			REET ADDRESS TY-ST-ZIP					
CITY-ST-ZIP				TLE			☐ Change	Addition	
TITLE		□ 04	all clo	AME					
NAME				REET ADDRESS					
STREET ADDRESS CITY-ST-ZIP			CI	TY-ST-ZIP					
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TITLE NAME				AME					
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CITY-ST-ZIP	•		CI	TY-ST-ZIP				Addition	
TITLE		□0		TLE			☐ Change	☐ Audition	
NAME				AME					
STREET ADDRESS	3			Treet address ITY-ST-ZIP					
1	i		■ じ	(11-51-417					

12. 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 empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.18.03

787-2308 Daytime Phone #