

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 12, 2003 8:00 am
Secretary of State

03-12-2003 90087 025 ***150.00

DOCUMENT # J93148

1. Entity Name
INTERNATIONAL PROMENADE, INC.



Principal Place of Business
**2479 ALOMA AVE
200
WINTER PARK FL 32792
US**

Mailing Address
**PO BX 1748
WINTER PARK FL 32790
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2857866**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GARDNER, JOSEPH J
2479 ALOMA AVE.
WINTER PARK FL 32792**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **DP GARDNER, JOSEPH J** ☐ Delete
STREET ADDRESS **2479 ALOMA AVE**
CITY-ST-ZIP **WINTER PARK FL 32792**

TITLE
NAME **D Diana S Walker** ☐ Change ☒ Addition
STREET ADDRESS **301 Virginia Ave**
CITY-ST-ZIP **Winter Park, FL 32789**

TITLE
NAME **DVST GARDNER, ROBERT** ☐ Delete
STREET ADDRESS **2479 ALOMA AVE**
CITY-ST-ZIP **WINTER PARK, FL 32792**

TITLE
NAME **D Sue Fisher** ☐ Change ☒ Addition
STREET ADDRESS **1004 Temple Grove**
CITY-ST-ZIP **Winter Park, FL 32789**

TITLE
NAME **DP WALKER, LANCE R** ☐ Delete
STREET ADDRESS **931 N PENNSYLVANIA AVE**
CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME **VDV FISHER, JOSEPH** ☐ Delete
STREET ADDRESS **1561 WOODLAND AVE**
CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME **DVS BECK, JOHN W** ☐ Delete
STREET ADDRESS **931 N PENNSYLVANIA AVE**
CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 empowered 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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/03
Date

4076791748
Daytime Phone #

CR2E034 (10/02)