

FILED
Feb 09, 2005 08:00 AM
Secretary of State

1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

2. The second step is to gather relevant information and data. This can involve research, consultation with experts, or collecting data from various sources.

3. The third step is to analyze the information and data collected. This involves identifying patterns, trends, and relationships that can help in understanding the problem.

4. The fourth step is to develop a solution or answer. This involves applying the knowledge and skills gained from the previous steps to create a plan or strategy that addresses the problem.

5. The fifth step is to implement the solution. This involves putting the plan into action and monitoring the progress to ensure that the solution is effective.

6. The sixth step is to evaluate the results. This involves assessing the outcomes of the solution and determining whether they meet the requirements of the task.

7. The seventh step is to communicate the results. This involves sharing the findings and conclusions with the relevant stakeholders and providing feedback on the process.

8. The eighth step is to reflect on the process. This involves thinking about what worked well and what could be improved for future tasks.

9. The ninth step is to document the process. This involves creating a record of the steps taken and the results achieved, which can be used as a reference for future tasks.

10. The tenth step is to review the process. This involves looking back at the entire process and making any necessary adjustments to improve efficiency and effectiveness.

1st MOORE CR2E034 (10/04)

4. FEI Number	59-2855130	Applied For	
		Not Applicable	

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

7. Name and Address of New Registered Agent

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 & printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 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	DP	☐ Delete
NAME	YATES, JOHN H	
STREET ADDRESS	2090 S NOVA ROAD STE 2B16	
CITY - ST - ZIP	DAYTONA BEACH FL 32119	

TITLE	ST	☐ Delete
NAME	YATES, PAT	
STREET ADDRESS	2090 S NOVA ROAD STE 2B16	
CITY ST ZIP	DAYTONA BEACH FL 32119	

TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY ST-ZIP	

TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
FILE	☐ Change ☐ Addition
NAME	000000221875
STREET ADDRESS	02/09/05-80050-011 150.00

TITLE ☐ Change ☐ Add
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

☐ Change ☐ Add ☐ Delete ☐ Cancel ☐ OK

TITLE	☐ Change	☐ Add
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

NAME ☐ Change ☐ Address

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Add

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:

John H. Yates JHN H YATES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

27.05

386-322 9191