## 2002 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nam	MENT # <b>K7849</b> 9 J.A. CROSON COMPANY	9		Secretary of St 02-03-2002 90031 018 ***1:	tate		
Principal Place of Business 7420 EAST COLONIAL DRIVE ORLANDO FL 32807 US		Mailing Address 7420 EAST COLONIAL DRIVE ORLANDO FL 32807 US					
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State			Applied For		
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 A	dditional		
<u> </u>	6. Name and Address of Current Re	gistered Agent		7. Name and Address of New Registered Agent			
		<u> </u>	Name				
CT CORPORATION 1200 SOUTH PINE ISLAND ROAD			Street Addres	Street Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324							
			City	City FL Zip Code			
9. This corporation is eligible to satisfy its intangible FILE NOW!!!			: Registered Agent signature requirements II FEE IS \$150.00 D2 Fee will be \$550.0 le to Department of \$	.00 10. Election Campaign Financing \$5. Trust Fund Contribution.	.00 May Be ed to Fees		
11.	OFFICERS AND DI	RECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC CROSON, JAMES A. 3111 LAKESHORE DR MT DORA FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LATOURELLE, MARK 7836 COPPERFIELD COURT ORLANDO FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	: Addition		
NAME STREET ADDRESS CITY-ST-ZIP	DVTS BAGGETT, DAVID 1950 LOUIS HENNA BLVD ROUND ROCK TX 78664	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTANSON, ROBERT 1950 LOUIS HENNA BLVD ROUND ROCK TX 78664	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HARVARD, JOSEPH 3504 BATTERSEA CT ORLANDO FL 32812	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WIMBERLY, CARL 1950 LOUIS HENNA BLVD ROUND ROCK TX 78664	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition		
of the cor	certify that the information supplied with th don this report or supplemental report is tr rporation or the receiver or trustee empow , or on an attachment with an address, with	ered to execute this report a	the exemption stated in ny signature shall have th as required by Chapter (	in Section 119.07(3)(i), Florida Statutes. I further certify that the the same legal effect as if made under oath; that I am an officer 607, Florida Statutes; and that my name appears in Block 11	information er or director or Block 12 if		

SIGNATURE:

1-16-02

407-380-6525