

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K78841

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: DIRECTIONS PLUS, INC.

Current Principal Place of Business:

29129 JOHNSTON RD.
20-23
DADE CITY, FL 33523 US

New Principal Place of Business:

Current Mailing Address:

A. LAYNE RACHT
107 LOST LAKE DR
COCOA, FL 32926 US

New Mailing Address:

A. LAYNE RACHT
29129 JOHNSTON RD, #20-23
DADE CITY, FL 33523 US

FEI Number: 65-0141228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RACHT, A. LAYNE
107 LOST LAKE DR
COCOA, FL 32926

Name and Address of New Registered Agent:

RACHT, A. LAYNE
29129 JOHNSTON RD
DADE CITY, FL 33523

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.

SIGNATURE: A. LAYNE RACHT

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: RACHT, A. LAYNE,
Address: 29129 JOHNSTON RD
City-St-Zip: DADE CITY, FL 33523 US

Title: PD () Delete
Name: RACHT, KENNETH G.,
Address: 29129 JOHNSTON RD
City-St-Zip: DADE CITY, FL 33523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: RACHT, A. LAYNE,
Address: 29129 JOHNSTON RD 20-23
City-St-Zip: DADE CITY, FL 33523 US

Title: PD (X) Change () Addition
Name: RACHT, KENNETH G.,
Address: 29129 JOHNSTON RD 20-23
City-St-Zip: DADE CITY, FL 33523

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. LAYNE RACHT

VD

04/30/2002

Electronic Signature of Signing Officer or Director

Date