

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L08642

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: DEVELOPMENT GROUP OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

PO BOX 7530
WINTER HAVEN, FL 33883 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7530
WINTER HAVEN, FL 33883 US

New Mailing Address:

FEI Number: 59-2968673 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHREIBER, MARK E
549 POPE AVE.
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

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: _____

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: DSV () Delete
Name: SCHREIBER, KAREN K
Address: P.O. BOX 7530 NA
City-St-Zip: WINTER HAVEN, FL

Title: DPT () Delete
Name: SCHREIBER, MARK E
Address: P.O. BOX 7530 NA
City-St-Zip: WINTER HAVEN, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DSV (X) Change () Addition
Name: SCHREIBER, KAREN K
Address: P.O. BOX 7530
City-St-Zip: WINTER HAVEN, FL 338837530 US

Title: DPT (X) Change () Addition
Name: SCHREIBER, MARK E
Address: P.O. BOX 7530
City-St-Zip: WINTER HAVEN, FL 338837530 US

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: KAREN K. SCHREIBER

DSV

04/29/2002

Electronic Signature of Signing Officer or Director

_____ Date