

**DOCUMENT # 116804**

1. Entity Name  
 FAMILY TRADITIONS, INC.



**FILED**  
**Apr 26, 2004 08:00 AM**  
**Secretary of State**

Principal Place of Business  
 152 BRANDYWINE CIR.  
 ENGLEWOOD, FL 34223 US

Mailing Address  
 152 BRANDYWINE CIR.  
 ENGLEWOOD, FL 34223 US

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**DO NOT WRITE IN THIS SPACE**

02032004 No Chg-P CR2E034 (10/03)

4. FEI Number  
 59-2971448

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

BAKER, FREDERICK A  
 152 BRANDYWINE CIR.  
 ENGLEWOOD, FL 34223

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 IN THIS SPACE**

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, 2004 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	BAKER, FREDERICK A
STREET ADDRESS	152 BRANDYWINE CIR.
CITY-ST-ZIP	ENGLEWOOD, FL 34223
TITLE	ST
NAME	VOWELL, ROBIN E
STREET ADDRESS	12617 FELDMAN AVE.
CITY-ST-ZIP	PORT CHARLOTTE, FL 33981
TITLE	D
NAME	BAKER, BETTY C
STREET ADDRESS	152 BRANDYWINE CIR.
CITY-ST-ZIP	ENGLEWOOD, FL 34223
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/27/04-80058-017 150.00

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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:** *Frederick A Baker* **PRESIDENT** *4-23-04*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR