

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90295 041 ***150.00

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DOCUMENT # **L17319**

1. Entity Name
DUCKWORTH, INC.



Principal Place of Business
**3370 PERSHING AVE.
ORLANDO FL 32806**

Mailing Address
**3370 PERSHING AVE.
ORLANDO FL 32806**

Address change

Address Change

2. Principal Place of Business

17109 Arbor Woods Court

3. Mailing Address

17109 Arbor Woods Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Orlando, FL

4. FEI Number

59-2966348

Applied For

Not Applicable

Zip

32820

Country

Orange

Zip

32820

Country

Orange

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DUCKWORTH, MARY V.
3370 PERSHING AVE.
ORLANDO FL 32806**

7. Name and Address of New Registered Agent

Name **Duckworth, Mary V.**

Street Address (P.O. Box Number is Not Acceptable)

17109 Arbor Woods Court

City **Orlando, FL**

FL

Zip Code **32820**

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

Mary V. Duckworth

3/31/03

Signature, typed or 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, 2003 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

TITLE **DPS** ☐ Delete
NAME **DUCKWORTH, MARY V.**
STREET ADDRESS **3370 PERSHING AVENUE**
CITY-ST-ZIP **ORLANDO FL**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPS** ☒ Change ☐ Addition
NAME **Duckworth, Mary V.**
STREET ADDRESS **17109 Arbor Woods Court**
CITY-ST-ZIP **Orlando, FL 32820**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Mary V. Duckworth

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/03

Date

407/291-8447

Daytime Phone #

CR2E034 (10/02)