20 UN	003 FOR PRO	ESS REPOR	RATION	!)	FILED Mar 21, 2003	8:00 am	
DOCU 1. Entity Nar COATING	59			Secretary of State 03-21-2003 90103 010 ***150.00			
Principal Place of Business 2430 VANDERBILT BCH RD STE 109- #170 NAPLES FL 34109 US 2. Principal Place of Business		Mailing Address 2430 VANDERBILT BCH RD STE 108- #170 NAPLES FL 34109 US 3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			ANGES	
City & State		City & State	City & State		4. FEI Number 65-0273715 Applied For		
Zip -	Country	Zip	Country			Not Applicable 75 Additional Required -	
	6. Name and Address of Curre	nt Registered Agent	Name		7. Name and Address of New Registered Agen	t	
SANDERS	s, irving d						
			Street /	Address (P.	O. Box Number is Not Acceptable)		
NAPLES I	FL 34109		- <u>-</u>				
د ــــــــــــــــــــــــــــــــــــ			City	City FL Zip Code istered office or registered agent, or both, in the State of Florida. I am familiar with, and accept			
SIGNATURE	lions of registered agent.		E: Registered Agent signa	<u> </u>	hen reinstating) DATE		
	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department				9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10. TITLE	OFFICERS AN	D DIRECTORS	11.	D/P/	ADDITIONS/CHANGES TO OFFICERS AND DIRI		
NAME STREET ADDRESS CITY-ST-ZIP	SANDERS, IRVING 3338 CERRITO COURT NAPLES FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sand 3338	ers, Irving Cerrito Court es, FL 34109	Change Addition (CO) (CO) (CO) (CO) (CO) (CO) (CO) (CO)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete PIERMAN-SANDERS, MAUREEN E 3338 CERRITO COURT NAPLES FL 34109		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V/ Pier 3338			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Shange 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	e por transformation and an	Delete	TITLE NAME STREET ADDRESS	¢		Change Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		. Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP			hange 🗋 Addition	
of the corr	URE:	is the and accurate and that m overed to execute this report a with all other like empowered.	ny signature shall h as required by Cha	ave the sar pter 607, F	on 119.07(3)(i), Florida Statutes. I further certify the ne legal effect as if made under oath; that I am an lorida Statutes; and that my name appears in Bloc res. 3/17/03 239–51	officer or director k 10 or Block 11 if 4-4657	