2002 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nar	JMENT # L75778 Y ACRES, INC.	3			Secreta 02-26-2002 90	ry of St	ate	
Principal Place of Business		Mailing Address		\dashv				
325 HOLIDAY ACRES DR ORLANDO FL 32833 US		325 HOLIDAY ACRES DR ORLANDO FL 32833 US			Handa dar 1868 - Handa dari 1864 - 1868 - 1868 - 1868 - 1868 - 1868 - 1868 - 1868 - 1868 - 1868 - 1868 - 1868	âll Bibii Bibii bibii bibil bibii	Bibli Oldii idbi	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI Nu	FEI Number Applied For Not Applicable			
Zip	Country	Zip	Country -	5. Certific	ate of Status Desired	\$8.75 Ad	ditional	
	6. Name and Address of Current Re	gistered Agent		7. Name a	and Address of New Regi			
			Name					
FOSDYCK, BEVERLY 325 HOLIDAY ACRES DR ORLANDO FL 32833			Street Address	Street Address (P.O. Box Number is Not Acceptable)				
ONDAND	011 32003		City			FL Zip Cod	le	
8 The above	e named entity submits this statement for the	on purpose of changing its	acistored office as social		hash facility One of Classic			
Tax filing	Signature, typed or printed name of registered agent and oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!! After May 1, 200	Registered Agent signature requirements FEE IS \$150.00 Fee will be \$550.00 The to Department of S	10.	Election Campaign Financ Trust Fund Contribution.	+	00 May Be	
11.	OFFICERS AND DI	RECTORS	12.	ADDITION	IS/CHANGES TO OFFICE	RS AND DIRECTOR	\$ IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STP FOSDYCK, BEVERLY 325 HOLIDAY ACRES DR ORLANDO FL 32833	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	an the same of the same	☐ 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			☐ Change	☐ Addition	
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			☐ Change	☐ Addition	
TITLE NAME Street address City-St-Zip	·	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
of the corp	ertify that the information supplied with this on this report or supplemental report is tru poration or the receiver or trustee empowe or on an attachment with an address, with	e and accurate and that my red to execute this report as	signature shall have the	i cama lanal aff	eet as if made under eeth:	that I am an officer.	ordination i	