

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90704 022 ***150.00

DOCUMENT # M74598

1. Entity Name

REVOLUTIONS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

203 University Blvd.

Suite, Apt. #, etc.

Suite 223

City & State

Winter Park, FL 32792

Zip

Country

3. Mailing Address

c/o Edye Murphy-Haddock

Suite, Apt. #, etc.

641 Pinetree Road

City & State

Winter Park, Florida 32178-9

Zip

Country

4. FEI Number

56-1604368

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional**

Fee Required

7. Name and Address of Current Registered Agent

Name Haddock Professional Association

Street Address (P.O. Box Number is Not Acceptable)
3200 University Blvd., Suite 210

City Winter Park FL Zip Code 32792

**DO NOT WRITE
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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE PSD
NAME Murphy-Haddock, Edith K.
STREET ADDRESS 641 Pinetree Road
CITY-ST-ZIP Winter Park, Florida 32789

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Edith K. Murphy-Haddock

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/02

Date

407-679-6171

Daytime Phone #

CR2E034B (12/01)