2001 UNIFORM BUSINESS REPORT (UBR)

3/1 3/1

FILED
Apr 16, 2001 8:00 am
Secretary of State
03-13-2001 90323 025 ****70.00

DOCUMENT # N00000000790 ✓

1. Entity Name
You & Me The World of Giving, Inc.

Principal Place of Business / Mailing Address
414 West Memorial Blvd
Lakeland, FL 33815

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number — [X] Applied For [ ] Not Applicable

5. Certificate of Status Desired [X] **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
William F. Wyllie 2404 Cleveland Heights Blvd. Lakeland, FL 33803-3115	Name Street Address (P.O. Box Number Is Not Acceptable) City **FL** Zip Code

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 William F. Wyllie — William F. Wyllie — 2/27/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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

Make Check Payable to: Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Chau L Duryee 414 West Memorial Blvd Lakeland, FL 33815 ☐ Delete	TITLE D / NAME / STREET ADDRESS / CITY-ST-ZIP	Director BRUCE ROBINSON 130 YOUNG PLACE LAKELAND, FL 33803 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer William F. Wyllie 2404 Cleveland Hgts Blvd Lakeland FL 33815 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME T / STREET ADDRESS / CITY-ST-ZIP	TRUSTEE ~~TRUNG THANH~~ DO AN 203 VERANDA DR LAKELAND, FL 33809 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME D / STREET ADDRESS / CITY-ST-ZIP	~~Trustee~~ Director JAMES E. JACKSON BOX 91125 LAKELAND, FL 33804-1125 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME T / STREET ADDRESS / CITY-ST-ZIP	Trustee Dorothy Ross 4613 Cedar Brook Way Lakeland, FL 33807 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME T / STREET ADDRESS / CITY-ST-ZIP	Trustee & secretary Sheila J. Corbin 233 village View LN Lakeland, FL 33809 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (11/00)

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 617, 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: William F. Wyllie — William F. Wyllie — 2/27/2001 — 863-534-7160
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #