

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 10, 2003 8:00 am**  
**Secretary of State**

02-10-2003 90399 039 \*\*\*\*78.75

**DOCUMENT # N00000001948**

1. Entity Name

**ROSS SMALL WORLD INCORPORATED**



Principal Place of Business

**5620 47TH ST.  
VERO BEACH FL 32967**

Mailing Address

**5620 47TH ST.  
VERO BEACH FL 32967**

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

**75-3296192**

**New Number**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HOLT, WILLIAM**

**1850 40TH AVE., B-302  
VERO BEACH FL 32960**

**4129 - 57th Ave.**

7. Name and Address of New Registered Agent

Name

**Holt, William**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

**William Holt**

**1-15-03**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete  
NAME **MCKENZIE, BRENDA**  
STREET ADDRESS **4285 39TH ST**  
CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE **D Vice Chairman** ☐ Delete  
NAME **ROLLE, SAMUEL**  
STREET ADDRESS **473 CARAVAN TER**  
CITY-ST-ZIP **SEBASTIAN FL 32958**

TITLE **D** ☒ Delete  
NAME **JENKINS, LORINE**  
STREET ADDRESS **1405 SW 20TH AVE**  
CITY-ST-ZIP **VERO BEACH FL 32962**

TITLE **D** ☒ Delete  
NAME **ROSS, MERCY**  
STREET ADDRESS **5620 47TH ST**  
CITY-ST-ZIP **VERO BEACH FL 32967**

TITLE **D** ☐ Delete  
NAME **HOLT, WILLIAM**  
STREET ADDRESS **1850 40TH AVE B302**  
CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition  
NAME **Mary Barner Holmes Treasure**  
STREET ADDRESS **4189 - 57th Ct.**  
CITY-ST-ZIP **VERO Bch, FL 32967**

TITLE ☐ Change ☒ Addition  
NAME **Vice Chairman Samuel Rolle**  
STREET ADDRESS **473 Caravan Ter**  
CITY-ST-ZIP **Sebastian, FL 32958**

TITLE ☐ Change ☒ Addition  
NAME **Secretary Jeri Spearman**  
STREET ADDRESS **4216 55th Ave**  
CITY-ST-ZIP **VERO Bch, FL 32967**

TITLE ☐ Change ☒ Addition  
NAME **Chairman Clifford Relford**  
STREET ADDRESS **5730 46th St.**  
CITY-ST-ZIP **VERO Bch, FL 32967**

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

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 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

**Clifford Relford**

**1-23-03**

CR2E037 (10/02)