2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2001 8:00 am
Secretary of State
01-26-2001 90004 031 ****61.50

DOCUMENT # N00000003130

1. Entity Name

MASHACH DEVELOPMENT AGENCY, INCORPORATED

Principal Place of Business	Mailing Address
P.O. BOX 1514 DADE CITY FL 33526-1514	P.O. BOX 1514 DADE CITY FL 33526-1514

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
13826 98 ByPass Rd	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Dade City, FL	
City & State	City & State
33523	
Zip / Country: Pasco	Zip / Country

4. FEI Number: 59360 8533 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, DOMETA
38740 11TH AVENUE
ZEPHYRHILLS FL 33540

7. Name and Address of New Registered Agent

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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when submitting.)

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	P MCCLENDON, JESSE 14419 DELMAR STREET DADE CITY FL 33523	☐ Delete	T Maxine Tuckea 14610 Osceola St DADE City FL 33523	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V COWARD, SAUNDRA 20716 WORMACK ROAD DADE CITY FL 33523	☐ Delete	T Stephanie Thompkins 14661 Douglas Drive DADE City FL 33525	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T REED, FREDDIE 37304 MCCERI AVENUE DADE CITY FL 33523	☐ Delete	T Carneatha Carroll POBox 2478 Lutz, FL 33543	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GLOVER-STEELE, CYNTHIA A 38934 OLD SPARKMAN STREET DADE CITY FL 33523	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	—	☐ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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 trustees 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: [signature] 1/13/2001 352 523-1522

SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OR MANAGER OR OFFICER OR DIRECTOR — Date — Daytime Phone #

[signature] 4/6/2001