

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 12, 2001 8:00 am**  
**Secretary of State**

09-12-2001 90107 034 \*\*\*550.00

**DOCUMENT # N00000005095**

1. Entity Name

**Y.E.S. OPPORTUNITIES, INC.**

UA

Principal Place of Business

NEW - Mailing Address 13889 Del Webb Blvd.

~~8828 SE 140TH LANE ROAD~~  
 SUMMERFIELD FL ~~34498~~ 34491

~~8828 SE 140TH LANE ROAD~~  
 SUMMERFIELD FL ~~34498~~

Spruce Creek County  
 Summerfield, Fl. 34491  
 C16.

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

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

COBBS, DOROTHY R ice  
 8828 SE 140TH LANE ROAD 13889 Del Webb Blvd.  
 SUMMERFIELD FL 34498 ~~Summerfield, FL~~  
 Summerfield, FL 34491

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)

9/7/01  
 DATE

**FILE NOW: FEE IS \$61.25**  
**After September 12, 2001, min. will be \$236.25**

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 ☐ Delete  
 NAME D  
 STREET ADDRESS COBBS, DOROTHY R ice 13889 DEL Webb Blvd.  
 CITY-ST-ZIP ~~8828 SE 140TH LANE ROAD~~ Spruce Creek Blvd.  
 SUMMERFIELD FL ~~34498~~ 34491 County C16

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

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS JEFFERSON, MARY  
 CITY-ST-ZIP 9524 MIDLAND TURN  
 UPPER MARLBORO MD 20772

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

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS PAYNE, MARY  
 CITY-ST-ZIP 8 EAST ALEXANDRIA OVERLOOK  
 OXON HILL MD 20745

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
 NAME Board of Directors' member  
 STREET ADDRESS PATRICIA ANNE HOLMES  
 CITY-ST-ZIP 4405 N. Indianhead Rd.  
 Hernando, Fl. 34442

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 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:

SIGNATURE REQUIRED  
 DOROTHY RICE-COBBS

9/7/01

352-307669/92

CR2E037 (5/01)