2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2002 8:00 AM
Secretary of State

DOCUMENT# N00000005895

Entity Name: ADVOCATES FOR BETTER HEARING, INC.

Current Principal Place of Business:

609 NORSOTA WAY
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

609 NORSOTA WAY
SARASOTA, FL 34242

New Mailing Address:

FEI Number: 65-1046019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INNES, FLO
609 NORSOTA WAY
SARASOTA, FL 34242

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: INNES, FLO
Address: 609 NORSOTA WAY
City-St-Zip: SARASOTA, FL 34242

Title: DV ( ) Delete
Name: CAMEZON, JOAN
Address: 4814 KESTRAL PARK CIRCLE
City-St-Zip: SARASOTA, FL 34231

Title: DV ( ) Delete
Name: DEVLIN, DELORES
Address: 609 NORSOTA WAY
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FLO INNES DP 03/04/2002

Electronic Signature of Signing Officer or Director — Date