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

Mar 07, 2003 8:00 am Secretary of State N0000007010 DOCUMENT # 1. Entity Name 03-07-2003 90134 021 ****61.25 ADOPTION RANGER, INC. Principal Place of Business Mailing Address 1535 N. PARK DRIVE 1535 N. PARK DRIVE 103 WESTON FL 33326 WESTON FL 33326 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-3692884 Applied For --Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARLA PORTER GROSS, MARLA PORTER Street Address (P.Ø. Box Number is Not Acceptable) 1325 CHENILLE CIRCLE > Address Cher WESTON FL 33327 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 age **SIGNATURE** Signature, typed or printed name of registered age ht and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. * OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. DPT TITLE ☐ Delete TITLE ☐ Change ☐ Addition GROSS, MARLA PORTER NAME NAME STREET ADDRESS 1325 CHENILLE CIRCLE STREET ADDRESS CITY-ST-ZIP WESTON FL 33327 CITY-ST-ZIP DVPS TITLE ☐ Delete TITLE ☐ Change ☐ Addition GROSS, BRADLEY J NAME NAME STREET ADDRESS 1325 CHENILLE CIRCLE -STREET ADDRESS CITY-ST-7IP WESTON FL 33327 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition PORTER, BARBY H NAME NAME STREET ADDRESS 6911 ENVIRON BLVD.: ¥7J STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change Addition PORTER, LEONARD NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE ☐ Change ☐ Addition LEWIS, JUNE L STREET ADDRESS 5675 SW 74TH AVE. STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33143** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED