

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000001113

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: ORANGE BELT YABA, INC.

Current Principal Place of Business:

3215 NE LAKE SEBRING DR
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

3215 NE LAKE SEBRING DR
SEBRING, FL 33870

New Mailing Address:

FEI Number: 59-0705213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRISON, JOSEPH A
3500 S FLORIDA AVE STE 3
LAKELAND, FL 33803 US

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: D () Delete
Name: GILES, CHARNELL
Address: 5416 HARBOR DR E
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: LIPHAM, JIMMY
Address: 108 PADGETT PL S
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: DAVIS, JULIE
Address: 3215 NE LAKE SEBRING DR
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: HOTCHKISS, DENNIS
Address: 711 CANDYCE AVE
City-St-Zip: LAKELAND, FL 33815

Title: D () Delete
Name: LARSON, SHERI
Address: 1619 HOMESTEAD ST
City-St-Zip: SEBRING, FL 33871

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:

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

Title: D (X) Change () Addition
Name: LARSEN, CHERI
Address: 1619 HOMESTEAD ST
City-St-Zip: SEBRING, FL 33871

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: JULIE DAVIS

D

04/30/2002

Electronic Signature of Signing Officer or Director

Date