2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000002321

Entity Name: HONEY IN THE ROCK CORPORATION

FILED Sep 13, 2002 Secretary of State

Littly Name: HONET IN THE ROOK CORPOR	ATION
Current Principal Place of Business:	New Principal Place of Business:
382 MARION OAKS LANE OCALA, FL 344732912	382 MARION OAKS LANE OCALA, FL 344732912 US
Current Mailing Address:	New Mailing Address:
382 MARION OAKS LANE OCALA, FL 344732912	382 MARION OAKS LANE OCALA, FL 344732912 US
FEI Number: 27-0029360 FEI Number Applied For	() FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Ag	ent: Name and Address of New Registered Agent:
MOORE, RENEE Y 382 MARION OAKS LANE OCALA, FL 344732912	MOORE, RENEE Y 382 MARION OAKS LANE OCALA, FL 344732912 US
The above named entity submits this statement f in the State of Florida.	or the purpose of changing its registered office or registered agent, or both,
SIGNATURE: RENEE YVONNE MOORE	09/13/2002
Electronic Signature of Register	red Agent Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: () Delete Name: Address: City-St-Zip:	Title: D () Change (X) Addition Name: MOORE, RENEE Y CEO/D Address: 382 MARION OAKS LANE City-St-Zip: OCALA, FL 344732912 US
Title: () Delete Name: Address: City-St-Zip:	Title: D/T () Change (X) Addition Name: RAGLAND, NATHALIE K T/D Address: 382 MARION OAKS LANE City-St-Zip: OCALA, FL 344732912 US
Title: () Delete Name: Address: City-St-Zip:	Title: S/D () Change (X) Addition Name: GAINES, ALPINE S/D Address: 524 NW 13TH TERRACE City-St-Zip: OCALA, FL 34475 US

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: RENEE MOORE PRES 09/13/2002