

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000006059

FILED
May 11, 2002 8:00 AM
Secretary of State

Entity Name: MARKETPLACE FOUNDATION, INC.

Current Principal Place of Business:

2301 LUCIEN WAY SUITE 195
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

2301 LUCIEN WAY SUITE 195
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 59-3738932

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELSON, RANDY
2301 LUCIEN WAY SUITE 195
MAITLAND, FL 32751

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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: HUGHES, SHARON
Address: 2301 LUCIEN WAY, SUITE 195
City-St-Zip: MAITLAND, FL 32751 US

Title: D () Change (X) Addition
Name: MITCHELSON, RANDALL N
Address: 2301 LUCIEN WAY, SUITE 195
City-St-Zip: MAITLAND, FL 32751 US

Title: D () Change (X) Addition
Name: BERMAN, SHERRY
Address: 2301 LUCIEN WAY, SUITE 195
City-St-Zip: MAITLAND, FL 32751 US

Title: D () Change (X) Addition
Name: BAIER, BILL
Address: 2301 LUCIEN WAY, SUITE 195
City-St-Zip: MAITLAND, FL 32751 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: RANDALL MITCHELSON

D

05/11/2002

Electronic Signature of Signing Officer or Director

Date