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

## DOCUMENT # N02000003285

1. Entity Name

STAND, INC.



## **FILED** Jan 10, 2003 8:00 am Secretary of State

01-10-2003 90083 002 \*\*\*\*61.25

				OF WE INS				
Principal Place of Business 2312 CHERRY RIDGE LANE BRANDON FL 33511		Mailing Address 2312 CHERRY RIDGE LANE BRANDON FL 33511						
2. Principal I	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
					<u> </u>			
City & State		City & State			4. FEI Number   Applied For   Not Applicable			
Zip Country		Zip Cou		ntry	5. Certificate of State	us Desired □ \$8	3.75 Add e Require	
	6. Name and Address of Current F	Registered Agent			7. Name and Addres	ss of New Registered Age	ent	
				Name				
174 SAN	N, TERRENCE N II ITA BARBARA WAY		Street Addre		s (P.O. Box Number is Not Acceptable)			
PALM DE	EACH GARDENS FL 33410			City		FL	Zip Cod	e .
	e named entity submits this statement for tions of registered agent.  Three No. 2  Stgnature, typed or printed name of registered agent a	FREEMAN ]	I	d office or register		e State of Florida. I am fam	iliar with,	and accept
FILE NOW: FEE IS \$61.25  9. Election Cam Trust Fund Co			. •	~ ~	\$5.00 May Be Added to Fees	Make Check F Florida Departm		
10.	OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CHANGES	TO OFFICERS AND DIREC	CTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ETHERIDGE, ALBERTO PO BOX 12791 GAINESVILLE FL 32604	☐ Delete		T ADDRESS ST-ZIP		С	) Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOUCHSTON, BOB 1298 CIMARRON CIRCL NE PALM BAY FL 32905	☐ Delete		į.		С	] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRAWFORD, MIKE 2511 E. COLONIAL DRIVE, #166 ORLANDO FL 32803	☐ Delete		l l		С	] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEMPLE, TERRY 2312 CHERRY RIDGE LANE BRANDON FL 33511	☐ Delete		l l			] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP			] Change	Addition
TITLE NAME STREET ADDRESS CITY_ST_7IP		☐ Delete		T ADDRESS			Change	Addition

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.

SIGNATURE:

DESIGNING OFFICER OR DIRECTOR L Kemple 1/7/03 813 6)3 4822