

DOCUMENT # N03000004502 1. Entity Name OSLO CONCERNED CITIZENS LEAGUE, INCORPORATED	
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04-05-2004 90073 005 *****61.00

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SECRETARY OF STATE

I HEREBY CERTIFY THAT THE ABOVE NAMED ENTITY HAS BEEN REGISTERED IN ACCORDANCE WITH THE FLORIDA STATUTES.

Principal Place of Business 895 SW 11TH ST. VERO BEACH, FL 32960	Mailing Address 895 SW 11TH ST. VERO BEACH, FL 32960
2. Principal Place of Business 895 11th St. SW	3. Mailing Address 895 11th St. S.W
Suite, Apt. #, etc.	Suite, Apt. #, etc.

03312004 Chg-NP CR2E037 (10/03)

City & State Vero Beach, FL	City & State Vero Beach, FL	4. FEI Number 42-1607468	Applied For ☐ Not Applicable
Zip 32962	Country U.S	Zip 32962	Country
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WIGGINS, JOE 895 SW 11TH ST. VERO BEACH, FL 32960	7. Name and Address of New Registered Agent Name Wiggins, Joe Street Address (P.O. Box Number is Not Acceptable) 895 11th St. SW City Vero Beach FL Zip Code 32962
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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 agent.

SIGNATURE Joe Wiggins DATE 4-1-04
Signature, typed or printed name of registered agent and box # if applicable. (NOTE: Registered Agent Signature required when submitting)

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WIGGINS, JOE 895 SW 11TH ST. VERO BEACH, FL 32960 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Wiggins, Joe (P) ☒ Change ☐ Addition 895 11th St SW Vero Beach, FL 32962
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP INGRAM, LONNIE JR. 1055 SW 13TH ST. VERO BEACH, FL 32962 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JENKINS, THOMAS 785 SW 9TH AVENUE VERO BEACH, FL 32962 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARSHALL, CHARLIE M 1125 SW 9TH COURT VERO BEACH, FL 32962 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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: Joe Wiggins DATE 4-1-04
SIGNATURE, TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR