UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

					Fig. 1 - Property Company	
DOCU	MENT # <b>N11766</b>			SECI	FILED	
1. Entity Nan				DIVISIO	RETARY OF STATE IN OF CORPORATIONS	
	ASSOCIATION OF PUBLIC P	URCHASING OFFICEH	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<b>47</b> / 1	,	
SINC	•	ì	A CONTRACTOR	03 A	UG 27 AM 8: 00	
Principal Plac	ce of Business	Mailing Address			OCE AND OUR	
4043-REID STI		POST OFFICE BOX 1429				
PALATKA FL 3		PALATKA FL 3217		J		
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2. Principal F	Place of Business  Shoot Ave	3. Mailing Address	992		P) ((8)2 18818 B)(38 B)5) B\$B)1 B1B11 B1B11 B1B11 B1B11 B1B	4   <b> </b>
Suite, Apt.	<del> </del>	Suite, Apt. #, etc.	-11		OUTON LIEDE IE MANINO OLIMNOES	mal
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City & Stat	te in the	City & State		4. FEI Number 59	<b>-2615678</b> Ar	plied For
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Zíp ·	Country	Zip	Country.	5. Certificate of St	atus Desired \$8.75 Add	
3250		32704	orange	<u> </u>	ree nequire	
of the second	6. Name and Address of Current	Hegistered Agent	- Name	\7. Name and Add	ress of New Registered Agent	<del></del>
MEANED.	ALAMA I		\	NETNEVIN		
-WEAVER,	FICE BOX 1429	, r.e.	Street Add	dress (P.O. Box Number is N	lot Acceptable)	•
	FL 32178			- 20 2V	OTEL NOC	
	/ / J2170			·		
	j		City C	(LO MAJUT)	FL   答究	シッケー
	named entity submits this statement for	r the purpose of changing its	registered office or re		the State of Florida. I am familiar with,	and accept
the obligat	tions of registered agent.	·+·		k .		
* .	$f_{ij} = f_{ij}$					j
SIGNATURE:	Signature, typed or printed name of registered agent a	and title if a principle (NOTE	- Designationed & continuous		DATE	
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	: Registered Agent signature	required when reinstating)	DATE	
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	FILE NOW: FEE IS \$61,25	4 9. Election Cam		3 - \$5.00 May,Be	Make Check Payable	to
	tember 10, 2003, min will be \$2		ontribution.	\$5.00 May.Be Added to Fees	Make Check Payable Florida Department of \$	to State
After Sept	tember 10, 2003, min will be \$2	<b>36.25</b> Trust Fund Co		Added to Fees	Make Check Payable Florida Department of S	State
After Sept	tember 10, 2003, min will be \$2	<b>36.25</b> Trust Fund Co	ontribution.	Added to Fees  ADDITIONS/CHANGE	Florida Department of S	State
After Sept	tember 10, 2003, min will be \$2	Trust Fund Co	11. TITLE NAME	Added to Fees  ADDITIONS/CHANGE  ADDITIONS/CHANGE	Florida Department of S  S TO OFFICERS AND DIRECTORS IN  Change	State
After Sept 10. TITLE NAME	OFFICERS AND DIF  SB V  WEAVER, ALAN E  4049 REID STREET	Trust Fund Co	11. TITLE NAME STREET ADDRESS	Added to Fees  ADDITIONS/CHANGE  ADDITIONS/CHANGE  ADDITIONS/CHANGE	Florida Department of S  TO OFFICERS AND DIRECTORS IN  Change  Thews Ave	State
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