4/6/0

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State

04-06-2001 90063 008 ****61.25

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DO NOT WRITE IN THIS SPACE

DOCUMENT # N17762

1. Entity Name

CONNIE MACK-ALLIE SCHMIDT TENT, SAINTS AND SINNE

Principal Place of Business	Mailing Address
4809 SW 13TH AVE P O BOX 366 CAPE CORAL FL 33914 US	P O BOX 366 P.O. BOX 366 CAPE CORAL FL 33910 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2620198 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VECERA, ROBERT W 1596 WHISKEY CREEK DR P O BOX 366 FT MYERS FL 33903	Name: RODNEY TEMPLETON Street Address (P.O. Box Number is Not Acceptable): 4160 YARMOUTH COURT City: No FT. MYERS FL Zip Code: 33903

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.

SIGNATURE: R E Templeton — Treasurer — 4/2/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KOHL, KLAUS 4809 SW 13TH AVE CAPE CORAL FL 33914 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PRESIDENT ROBERT FRABELL 1516 CORAL ISLE COURT FT. MYERS FL 33919 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SD MARKS, ROBERT E 7715 CAMERON CIRCLE FT MYERS FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD VECERA, ROBERT W. 1596 WHISKEY CREEK DR. FT MYERS FL ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TREASURER RODNEY TEMPLETON 4160 YARMOUTH COURT NO FT MYERS, FL 33903 ☒ 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
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: SIGNATURE REQUIRED — RODNEY TEMPLETON — 4/2/01 — 941-997-1492

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (10/00)