2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N35384

1. Entity Name

CENTER OF SUSTAINABLE AGROFORESTRY, INC.

FILED
01 OCT 11 AM 9:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business	Mailing Address
P.O. BOX 2059 ST. LEO FL 33574 US	P.O. BOX 2059 ST. LEO FL 33574 US

DO NOT WRITE IN THIS SPACE

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 59-2989921 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CUNILIO, THOMAS V
33601 STATE RD 52
ST LEO FL 33574

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____
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
After September 12, 2001, min. will be $236.25

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	D SCHRADER, JEROME P.O. BOX 2337 DADE CITY FL 33526	☐ Delete	D MIKE LITVANY 1212 MT VERNON ST. ORLANDO, FL 32803-5418	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SWIETNICKI, JOHN 1829 AVONDALE CIRCLE JACKSONVILLE FL	☐ Delete	T RAMIRO GALLEGOS PO BOX 10 ST. LEO, FL 33574	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AUGUSTIN, FELIX BR, OSB ST. LEO ABBEY, BOX 2007 ST. LEO FL 33574	☐ Delete	SWIETNICKI, JOHN (DIR.) 1829 AVONDALE CIRCLE JACKSONVILLE, FL 32205	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GLICK, RICHARD D CFR 1909 CHOWK EEBIN CT. TALLAHASSEE FL	☒ Delete	70000464534 7---1 -10/19/01--01032--001 *****66.25 *****66.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☑ Change ☐ Addition

CR2E037 (5/01)

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.

352 588- 5399

SIGNATURE: SIGNATURE REQUIRED THOMAS V. CUNILIO SEPT 12, 2001

COSAF
CENTER OF SUSTAINABLE AGROFORESTRY, INC.
P.O. BOX 2059, ST. LEO, FLORIDA 3357
(352) 376-5935 FAX
(352) 376-6265 GAINESVILLE
(352) 5[illegible]399 LEO

9/12 Draft

DEAR MADAME SECRETARY -

THE REASON THIS IS ARRIVING PAST THE 9/12 DEADLINE IS DUE TO MY HAVING TO DRIVE TO N.Y.C. TO BE WITH MY SISTER'S FAMILY. SHE WAS IN THE WTC ON 9/11 AND WAS SERIOUSLY INJURED. SHE WORKS FOR FEMA. PLEASE ACCEPT THE COSAF CHECK WITHOUT PENALTY.

THANK YOU VERY MUCH.

Th[illegible]