

FILED
Feb 14, 2003 8:00 am
Secretary of State

02-14-2003 90223 050 ****61.25

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

DOCUMENT # N37277		
1. Entity Name THE CENTER FOR RECREATIONAL COMMUNICATION, INC.		
Principal Place of Business 7907 NASHUA LANE ORLANDO, FL 32817 US		Mailing Address PO BOX 4126 WINTER PARK, FL 32793-4126 US
2. Principal Place of Business 718 Holly Road Suite, Apt. #, etc.		3. Mailing Address PO Box 122 Suite, Apt. #, etc.
City & State Anna Maria FL		City & State Anna Maria FL
Zip 34216 Manatee		Zip 34216 Manatee
4. FEI Number 59-2999862		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent CROSS, MILTON 7907 NASHUA LANE ORLANDO, FL 32817
7. Name and Address of New Registered Agent Name CROSS, MILTON Street Address (P.O. Box Number is Not Acceptable) 718 Holly Road City Anna Maria FL Zip Code 34216		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 <u>Milton B. Cross</u> DATE <u>2/11/2003</u> (NOTE: Registered Agent signature required when electing)
FILE NOW - FEES \$6125		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SOUTHWICK, ROBERT 2176 CALAIS LANE FERNANDINA BEACH, FL 32034	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CROSS, MILTON 7907 NASHUA LANE ORLANDO, FL 32817	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GILLAM, LYNN A 2368 WHITEHALL DRIVE WINTER PARK, FL 32792	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP
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: <u>Milton Cross</u> DATE <u>2/11/2003</u> DAYTIME PHONE # <u>941-778-5324</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		

90026801



☒ CHECK HERE IF MAKING CHANGES

CR2E037 (10/02)