

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N48277

FILED  
May 01, 2002 8:00 AM  
Secretary of State

Entity Name: FURPERSON RETREAT INC.

**Current Principal Place of Business:**

4320 NEFF LAKE ROAD  
BROOKSVILLE, FL 346018012 US

**New Principal Place of Business:**

**Current Mailing Address:**

4320 NEFF LAKE ROAD  
BROOKSVILLE, FL 346018012 US

**New Mailing Address:**

FEI Number: 59-3141320

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COSTON, ELIZABETH  
4320 NEFF LAKE RD.  
BROOKSVILLE, FL 34601 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: COSTON, ELIZABETH,  
Address: 4320 NEFF LAKE RD  
City-St-Zip: BROOKSVILLE, FL

Title: DV ( ) Delete  
Name: DERICKSON, PATTI ANN,  
Address: 781 VILLAGE LAKE TER N  
City-St-Zip: ST PETERSBURG, FL

Title: DS ( ) Delete  
Name: CENTER, BARBARA,  
Address: 621 12TH ST NW  
City-St-Zip: LARGO, FL

Title: DT ( ) Delete  
Name: CENTER, CLARENCE E,  
Address: 621 12TH ST. NW  
City-St-Zip: LARGO, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: FURPERSON RETREAT, I, NC.  
Address: 4320 NEFF LAKE RD  
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH COSTON

DP

05/01/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date