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Secretary of State
03-31-2003 90221 045 ****70.00

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

DOCUMENT # N48334

1. Entity Name
CHAMORROS AND FRIENDS GUAM CLUB OF FLORIDA, INC.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
806 Mazurka Dr.	806 Mazurka Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Chuluota, FL	City & State: Chuluota, FL
Zip: 32766 / Country: US	Zip: 23766 / Country: US

4. FEI Number: 59-3115794 — Applied For / Not Applicable

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

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7. Name and Address of Current Registered Agent
Name: Maria P. Alcantara
Street Address (P.O. Box Number is Not Acceptable): 806 Mazurka Dr.
City: Chulutoa FL Zip Code: 32766

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: Maria P. Alcantara
Maria P. Alcantara, President — 3/26/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
P	Maria P. Alcantara	806 Mazurka Dr.	Chuluota, FL 32766
VP	Joseph Camit	1 Edge Place	Palm Coast, FL 32164
S	Annie Torres	5281 Heathwood Gable Terrace	Jacksonville, FL 32257
T	Lydia Dungca	1808 Mahagany Drive	Orlando, FL 32825
D	James Reed	10913 Mill Pond Way	Orlando, FL 32825
D	Barbara Noble	20 Pansy Court	Middleburg, FL 22068

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CR2E037B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Maria P. Alcantara — 3/26/03 — 407-977-6029
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #