

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

**FILED**  
**Apr 25, 2003 8:00 am**  
**Secretary of State**

04-25-2003 90289 004 \*\*\*\*70.00

UBR4512

**DOCUMENT # N93000004720**

1. Entity Name

**M.U.G., INC.**



Principal Place of Business

**3220 VAIL VIEW DRIVE  
DAYTONA BEACH FL 32128**

Mailing Address

**3220 VAIL VIEW DRIVE  
DAYTONA BEACH FL 32128**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**32128**

**32128**

4. FEI Number **59-3205967**

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

**BROWN, JONI  
3220 VAIL VIEW DRIVE  
DAYTONA BEACH FL 32128**

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. I am familiar with, and accept the obligations of registered agent.

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**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>T</b>	<input type="checkbox"/> Delete
NAME	<b>BROWN, JONI</b>	
STREET ADDRESS	<b>3220 VAIL VIEW DR</b>	
CITY-ST-ZIP	<b>DAYTONA BCH FL</b>	
TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>LATZKO, ANDREA</b>	
STREET ADDRESS	<b>6226 CRAFTON STREET</b>	
CITY-ST-ZIP	<b>PHILADELPHIA PA 19149</b>	
TITLE	<b>S</b>	<input type="checkbox"/> Delete
NAME	<b>JOHNSON, EDWARD</b>	
STREET ADDRESS	<b>7650 RAGLAN DR NE</b>	
CITY-ST-ZIP	<b>WARRAN OH</b>	
TITLE	<b>V</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>GAZETTE, MARK</b>	
STREET ADDRESS	<b>28640 MANNING ROAD</b>	
CITY-ST-ZIP	<b>PUEBLO CO</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>HILL, GORDON</b>	
STREET ADDRESS	<b>2166 N 700 WEST</b>	
CITY-ST-ZIP	<b>OGDEN UT 84414</b>	
TITLE	<b>CD</b>	<input type="checkbox"/> Delete
NAME	<b>OWENS, BUDDY</b>	
STREET ADDRESS	<b>120 BEECHWOOD HILLS DRIVE</b>	
CITY-ST-ZIP	<b>RALEIGH NC 27603</b>	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>V</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>CD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>CIPRIANO, JOSEPH</b>	
STREET ADDRESS	<b>17651 SW 8th STREET</b>	
CITY-ST-ZIP	<b>PEMBROKE PINES, FL 33029</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>S</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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: **Joni Brown** **REQUIRED JONI BROWN 04/21/03 386-226-6807**

CR2E037 (10/02)

ATTACHMENT

N9300000 4720

80090748

Please add the following Director:

D

Meyer, Greg

3800 Victory Parkway

Cincinnati, OH 45207