2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 27, 2002 8:00 AM
Secretary of State

DOCUMENT# N93000005356

Entity Name: COLONIAL TOWN CENTER BUSINESS ASSOCIATION, INC.

Current Principal Place of Business:

4270 ALOMA AVENUE
#124-61C
WINTER PARK, FL 32792 US

New Principal Place of Business:

Current Mailing Address:

4270 ALOMA AVENUE
#124-61C
WINTER PARK, FL 32792 US

New Mailing Address:

FEI Number: 59-3217153 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CETRONE, DAN
4270 ALOMA AVE
#124-61C
WINTER PARK, FL 32792 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: D ( ) Delete
Name: CETRONE, DAN
Address: 4270 ALOMA AVE #124-61C
City-St-Zip: WINTER PARK, FL 32792

Title: T ( ) Delete
Name: FOSTOFF, ELLEN
Address: 4270 ALOMA AVENUE #124-61C
City-St-Zip: WINTER PARK, FL 32792

Title: D ( ) Delete
Name: RUGGIERO, MARY ANN
Address: 1337 BRANDY LAKE VIEW CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787

Title: D ( ) Delete
Name: MIDDLETON, BARBARA
Address: 592 LITTLE RIVER LOOP 207
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DAN CETRONE D 06/27/2002

Electronic Signature of Signing Officer or Director Date