2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 01, 2001 8:00 am Secretary of State DOCUMENT # N9500004160 UNITED NATIVE AMERICANS OF CENTRAL FLORIDA, INC. 02-01-2001 90006 038 ****61.25 Principal Place of Business Mailing Address P.O. BOX 950305 P.O. BOX 950305 LAKE MARY FL 32795-0305 LAKE MARY FL 32795-0305 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3333530 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LODGE, DEBORAH 665 YOUNGSTOWN PKWY **UNIT 267** Zip Code ALTAMONTE SPRINGS FL 32714 FL 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. **PSD** ☐ Addition TITLE ☐ Delete TITLE XI Change PD LODGE, DEBORAH NAME NAME Deborah Lodge 665 YOUNGSTOWN PKWY, UNIT 267 STREET ADDRESS STREET ADDRESS 665 Youngstown Parkway, #267 CITY-ST-ZIP **ALTAMONTE SPRINGS FL 32714** CITY-ST-7IP Altamonte Springs, FL 3271 TITLE TD ☐ Delete TITLE X Change ☐ Addition Richard Hatcher NAME RICHARD HATCHER NAME ~∠7 STREET ADDRESS 1912 RUSSOBER COURT STREET ADDRESS 1912 Russober Court CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP Orlando: FL 32826 TITLE ☐ Delete TITLE Change Addition CHRISTY, MARYANNA NAME NAME STREET ADDRESS **504 GEORGE STREET** STREET ADDRESS CITY-ST-ZIP City-St-7IP WINTER SPRINGS FL 32708 TITLE Delete TITLE Change ✓ Addition Lyle Christy (Director) KIRKLAND, RON NAME NAME 504 George Street STREET ADDRESS **5090 PALMETO ROAD** STREET ADDRESS Winter Springs, FL 32708 CITY-ST-7IP KISSIMMEE FL 34646 CITY-ST-ZIP TITLE Delete TITLE ▼ Addition Director Change SCHAEFFLER, RALPH NAME NAME Bill Chance STREET ADDRESS 1331 JULIO LANE STREET ADDRESS 1352 E. Lombardy Drive CITY-ST-ZIP ORLANDO FL 32807 CITY-ST-ZIP Deltona, FL 32725 VPD TITI F Addition ☐ Delete TITLE Change SHENK, CHRIS NAME NAME Chris Shenk STREET ADDRESS 4800 COACHMAN'S DR #2 STREET ADDRESS 4800 Coachman's Drive, #2 CITY-ST-ZIP ORLANDO FL 32812 CITY-ST-ZIP Orlando, FT: 32812

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

SIGNATURE:

changed, or on an attach

Document # N,95000004160

UNITED NATIVE AMERICANS OF CENTRAL FLORIDA, INC. #59-3333530

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Additional Officers/Directors: