2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000001592

Entity Name: FLORIDA FOX TROTTER ASSOCIATION, INC.

FILED Feb 28, 2003 Secretary of State

Current Principal Place of Business:		New Principal Pla	New Principal Place of Business:	
26010 APPLE BLOSSOM LANE WESLEY CHAPEL, FL 33544				
Current Mailing Address:		New Mailing Addre	New Mailing Address:	
26010 APPLE BLOSSOM LANE WESLEY CHAPEL, FL 33544				
FEI Number:	FEI Number Applied For()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address	s of New Registered Agent:	
	CATHY LE BLOSSOM LANE :HAPEL, FL 33544 US			
The above in the State	named entity submits this statement for the pur of Florida.	pose of changing its registe	red office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete WOODWARD, JIM 4750 BLUE HERON DE LEON SPRINGS, FL 32130	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete HALLGREN, WENDY 16900 S.E. 272ND COURT UMATILLA, FL 32784 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete WARREN, CATHY 26010 APPLE BLOSSOM LANE WESLEY CHAPEL, FL 33544 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete MIKELSON, TERESA 3835 S CURRY ROAD ST AUGUSTINE, FL 32092	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete BLANKENSHIP, BUD 7842 SADDLE CREEK TRAIL SARASOTA, FL 34241 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete PASCHAL, LINDA P.O. BOX 1 ONECO. FL. 34264 US		(X) Change()Addition , ROSS HWY 475 FL 34480 US	

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: CATHY WARREN S 02/28/2003

ANN HAYS, DIRECTOR 2696 OCEAN DRIVE FERNANDINA BEACH, FL 32034