## 2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # N96000002551 Sep 12, 2000 8:00 am Secretary of State 1. Entity Name ASSOCIATION OF FILIPINO-AMERICAN COMMUNITIES, IN 09-12-2000 90014 034 \*\*\*\*61.25 Principal Place of Business Mailing Address 8286-SE-54TH-AVE -9286-SE-54TH AVE OCALA FL 34471 OCALA FL 34471 2. Principal Place of Business 3. Mailing Address 3640 S.E. 24+ AUP 36405. E. 24tr XUP DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 52-1997971 CALA Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 34471 MARION U1/2/0N 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AGUINALDO V. REPIEDAD Street Address (P.O. Box Number is Not Acceptable) EVIDENTE, BALTAZAR G 3286 SE 54TH AVE OCALA FL 34471 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** Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 13, 2000 min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE Delete TITLE Change BALTAZAR 4. EVIDENTE 3286 SE 54tz XVO (CUIRRENT) PEREY, NIDA NAME NAME STREET ADDRESS STREET ADDRESS 3655 SE 56 TERR OCACA FC 34471 CITY-ST-ZIP CITY-ST-ZIP OCALA FL Delete TITLE TITLE POMPEY B. RAMOS BELL, JAMES NAME NAME 2403 S.F. 2012 CIRCLE 2330 SW 37TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP OCALA FL 34474 -TITLE Change ` Addition Delete TITLE BELO, JULIAN R JR CURRENT NAME NAME 5460 SE 29TH PLACE #D STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OCALA FL 34471 ☐ Addition Delete TOM 131009617 3420 NE 49th 9t. ☐ Change TITLE TITLE HARTZELL, LINDA NAME NAME STREET ADDRESS 10409 NE 29TH AVE STREET ADDRESS OCALL FL 74479 CITY-ST-ZIP CITY-ST-ZIP ANTHONY FL 32617 ☐ Change Addition TITLE TITLE ☐ Delete CUPREVI DIAZ, EMMANUEL NAME 9 JUNIPER PASS COURT /624 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP OCALA FL 34489 3447/ Delete Addition LEO LOPEZ 1922 SE 244 AVP ☐ Change TITLE TITLE ENRIQUE, ERIC NAME 3001 SE LAKE WEIR RD #216 STREET ADDRESS STREET ADDRESS OCALA FL 34471 CITY-ST-ZIP **OCALA FL 34471** 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECT