DOCUMENT # N9600003313 1. Entity Name NEIGHBORS UNITED, INC.				Sec	Feb 08, 2000 8:00 a Secretary of State		
Principal Place of Business		Mailing Address		_			
1301 WEST 31ST STREET RIVIERA BEACH FL 33404		1301 WEST 31ST STREET RIVIERA BEACH FL 33404-3547					
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 65-0700343 Not 1			
Zip	Country	Zip-	Country		us Desired - 5	3.75 Addition	
	6. Name and Address of Curre	nt Registered Agent		7. Name and Addre	ss of New Registered Age		
<u> </u>	o. Name and Address of Care	nt registered Agent	Name	- Tradic and Addic	33 Of New Tieglate Da Age		
CUNNINGHAM, ISABELLA 1301 WEST 31ST STREET			Street Addres	ddress (P.O. Box Number is Not Acceptable)			
	EACH FL 33404						
THE IN D	LACITIE COTOT		City		FL	Zip Code	
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing \$5.0 Trust Fund Contribution. Adde		Make Check Payable to d to Fees Department of State			
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES	TO OFFICERS AND DIREC	CTORS IN 10	
TITLE	D	Delete	TITLE		. [Change [
NAME STREET ADDRESS	CUNNINGHAM, ISABELLA		NAME STREET ADDRESS				
CITY-ST-ZIP	1301 West 31st Street Riviera Beach FL 33404		CITY-ST-ZIP				
TITLE	D	☐ Delete	TITLE] Change	
NAME	CHARLOW, LESSYE W		NAME STREET ADDRESS	of the second			
CITY-ST-ZIP	1241 W 33RD STREET RIVIERA BEACH FL 33404		CITY-ST-ZIP	,			
TITLE	D	☐ Delete	TITLE			Change	
NAME	GAINEY, CHARLES		NAME				
STREET ADORESS CITY-ST-ZIP	1208 W 28TH STREET		STREET ADORESS (CITY-ST-ZIP				
TITLE	RIVIERA BEACH FL 33404 D	Delete	TITLE			Change I	
NAME	FELDER, ROBERT C		NAME		_		
STREET ADDRESS CITY-ST-ZIP	2831 "S" AVENUE		STREET ADDRESS CITY-ST-ZIP				
TITLE	RIVIERA BEACH FL 33404	Delete	TITLE			Change 1	
NAME		L_J Delete	NAME	,	_	Journão i	
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	CITY-ST-ZIP			7 Chares	
TITLE NAME		☐ Delete	TITLE NAME		L] Change	
STREET ADDRESS	, 		STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
indicated	certify that the information supplied w on this report or supplemental repor	t is true and accurate and that r	nv signature shall have th	ie same legal effect as if r	nade under oath: that I am a	ลก officer ดเ	
oi the con	poration or the receiver or trustee en or on an attachment with an address	powered to execute this report with all other like empowered	as required by Chapter 6	i i i , hiorida Statutes; and	mar my name appears in Bl	OCK TO OF "	

SIGNATURE: SOMETIME AND THE PARTY OF THE PAR

82/4/2000 (56) 8 M. 1 -