2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9600003695 THINIOR SERVICE LEACHE OF CRESTVIEW EL INCORDODA

FILED Aug 10, 2001 8:00 am Secretary of State 08-10-2001 90003 034 ****61.25

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LUKE, STANLEY K 121 20 URT HOUSE TERRACE CRESTYLEW FL 32536 City FL Zip Code 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 Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Numb		6. Name and Address of Curren	t Registere	ed Agent			7. Name and Add	ress of New Register		, ,	
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City FL Zip Code 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 Symatre, typed or printed name of registered agent and the if Applicable. (ACTE Registered Agent Applicable required when rematerna) DATE				Street Addres		Address (P	is (P.O. Box Number is Not Acceptable)				
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											
FILE NOW: FEE IS \$51.25 After September 12, 2001, min. will be \$236.25 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TERRELL, BRANDI SIREET ADDRESS CITY-ST-2P CRESTIVIEW FL 32538 Details TILE SD D Details TILE NAME SIREET ADDRESS CITY-ST-2P CRESTIVIEW FL 32538 Details SIREET ADDRESS CITY-ST-2P CRESTIVIEW FL 32538 Details SIREET ADDRESS CITY-ST-2P CRESTIVIEW FL 32538 Details SIREET ADDRESS CITY-ST-2P SIREET ADDRESS CITY-ST-2P SIREET ADDRESS CITY-ST-2P SIREET ADDRESS CITY-ST-2P SIREET ADDRESS SIREET ADDRESS CITY-ST-2P SIREET ADDRESS SIREET ADDRE	+				City			J	FL Zip	Code	
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of the corporation or the receiver or fusite empowered to execute his 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.