2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 02, 2003
Secretary of State

DOCUMENT# N98000000033

Entity Name: PRESERVE OUR NEIGHBORHOOD, INC.

Current Principal Place of Business:

5096 KILTY CT EAST
BRADENTON, FL 34203

New Principal Place of Business:

Current Mailing Address:

5096 KILTY CT EAST
BRADENTON, FL 34203

New Mailing Address:

FEI Number: 65-0807686 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLEARY, KENNETH W
2401 MANATEE AVENUE WEST
BRADENTON, FL US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DST ( ) Delete
Name: LOVELACE, DICK
Address: 5096 KILTY CT EAST
City-St-Zip: BRADENTON, FL 34203

Title: D/P ( ) Delete
Name: FISCHER, GEORGE
Address: 4822 RAINTREE ST CIRCLE E
City-St-Zip: BRADENTON, FL 34203

Title: D/V ( ) Delete
Name: IVY PETERSON,
Address: 4924 KILTY CT EAST
City-St-Zip: BRADENTON, FL 34203

Title: D ( ) Delete
Name: CAROL B MONTAGUE,
Address: 4523 51ST ST E
City-St-Zip: BRAQDENTON, FL 34203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: RICHARD D. LOVELACE DR. 01/02/2003

Electronic Signature of Signing Officer or Director — Date