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**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N98000004284**

1. Corporation Name

**R.O.A.D. EMPOWERING UNITY, INC.**

Principal Place of Business

6690 CHERRY ROAD  
OCALA FL 34472

Mailing Address

6690 CHERRY ROAD  
OCALA FL 34472



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

07/24/1998

4. FEI Number

59-3524925

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired

X

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name Michelle Forsythe  
82 Street Address (P.O. Box Number is Not Acceptable)  
6690 Cherry Rd  
83 Ocala  
84 City FL 85 Zip Code 34472

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Michelle Forsythe Michelle Forsythe PTD 1-13-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE  
NAME FORSYTHE, MICHELLE  
STREET ADDRESS 6690 CHERRY ROAD  
CITY-ST-ZIP OCALA FL 34472

TITLE VSD ☒ DELETE  
NAME CHUNG, DIANA  
STREET ADDRESS 6690 CHERRY ROAD  
CITY-ST-ZIP OCALA FL 34472

TITLE D ☐ DELETE  
NAME BEDINGER, GEORGE M  
STREET ADDRESS 6690 CHERRY ROAD  
CITY-ST-ZIP OCALA FL 34472

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VD ☐ Change ☒ Addition  
1.2 NAME LAWRENCE COLLINS  
1.3 STREET ADDRESS 6690 Cherry Rd  
1.4 CITY-ST-ZIP OCALA, FL 34472

2.1 TITLE SD ☐ Change ☒ Addition  
2.2 NAME Veronica-Schubert  
2.3 STREET ADDRESS 6690 Cherry Rd  
2.4 CITY-ST-ZIP OCALA, FL 34472

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michelle Forsythe Michelle Forsythe 1/13/99 1-352-624-3301

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)