## FILED Jun 19, 2001 8:00 am Secretary of State

DOCUMENT # P00000029858							Secretary of State 05-16-2001 90009 003 ***150.00			
MORGAN, COLLING & GILBERT, TAMPA, P.A.							05-16-2001 9	°0009 003 °	***150.00	
Principal Plac	ce of Business		Mailing Address							
20 N. ORANGE AVE STE. 1607 ORLANDO FL 32801			20 N. ORANGE AVE., STE. 1607 ORLANDO FL 32801					. 74	973	
. Principal 5	Place of Busine	nge .	3. Mailing Address			_				
2. Principal Place of Business			or intaling models				- I TROUTER IN DELIX BRITT BRAIT CAN'T ROUTH ROUTH RELIX SENDE SAND VALUE OF SET LANCE LANCE TANDS			
Suite, Apt. #, etc.			Sulte, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State			City & State			1	4. FEI Number 59-364.8479	<u> </u>	pplied For ot Applicable	}
Zip Country			Zip C		Country		5. Certificate of Status Desired	\$8.75 Ad	ditional	1
6. Name and Address of Current Registered Agent						7	7. Name and Address of New Registers			1
					Name	_				l
	rgan, John N. Orange /	AVE., STE. 1607			Street Addi	ress (P.C	s (P.O. Box Number is Not Acceptable)			
ORL	ANDO FL 32	2801								
					City		F	L Zip Cod	le	1
8. The above	named entity	submits this statement for t	he purpose of changing its	register	ed office or re	gistered	agent, or both, in the State of Florida.		_	1
										1
SIGNATURE	Signature, typed o	r printed name of registered agent an	d title il applicable. (NOTE	: Flegistere	d Agent signature n	equired wh	en reinstating) DATE	<u> </u>	<del></del>	
9. This corpo	oration is eligit	ole to satisfy its Intangible	FILE NOW!		•		10. Election Campaign Financing	\$5.0	O May Be	
-	requirement a rla on back)	nd elects to do so.	After MAY 1, 20 Make Check Payab		~		Trust Fund Contribution.		to Fees	
11.		OFFICERS AND D	<u> </u>	12.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 11	
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NAME	COLLING, STEWART L		NAM	E ET ADDRESS					CR2E034 (10/00)	
STREET ADDRESS 20 N. ORANGE AVE., STE. 1607 ORLANDO FL 32801					ITY-ST-ZIP					
TITLE			☐ Delete	TITLE	:		•	☐ Change	☐ Addition	쮼
NAME	MORGAN,			NAM						-
STREET ADDRESS CITY-ST-ZIP		NGE AVE., STE. 1607 FL <u>328</u> 01			et address - St-Zip					
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CITY-ST-ZIP					S1-ZIP					
13. I hereby of indicated	certify that the	information supplied with the or supplemental report is to	is filing does not qualify for	the exer	notion stated i	in Section	on 119.07(3)(i), Florida Statutes. I further on the legal effect as if made under oath; that	ertify that the in	formation or director	

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 607, Florida Statutes, and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

**2001 UNIFORM BUSINESS REPORT (UBR)** 

CER OR DIRECTOR

3-1-01

Daytime Phone #

Service addressed to the service of 