FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Jun 02, 2002 8:00 am Secretary of State 06-02-2002 90905 012 ***150.00

DOCUMENT # <i>P000000 72883</i> 1. Entity Name			06-02-2002 90905 012 ***150.00		
G.G. OF S.W. FL	RIDA, JNC	7			
			U (4 4 0 J		
DO NOT WRITE					
2. Principal Place of Business 3300 BBN179 BEACH RD Suite, Apt. #, etc.	3. Mailing Address 54 SECONI Suite, Apt. #, etc.	STREET	DO NOT WRITE IN THIS SPA	ACE	
UD 17 # 161 City & State	City & State BODIZE SPR	incs El	4. FEI Number 65-1052471	Applied For Not Applicable	
BANITA SPRINGS FL Zip Country 34/34 USD	130111714 3 FM Zip 34134	Country USA	5 Certificate of Status Desired \$1	3.75 Additional e Required	
3//3/ 05/4		Name	7. Name and Address of Current Registered A	gent	
DO NOT WRITE		Street Address	(P.O. Box Number is Not Acceptable)	The second secon	
IN THIS SP	166a	City		Zip Code	
8. The above named entity submits this statement for the	he purpose of changing its r	egistered office of register	P SPRIDGS FL See agent; or both; in the State of Florida.	Zip Code 34/34	
SIGNATURE TILL 6955 Squature: Typed or printed name of registered agent and	Julie f applicable. (NOI)	Registered Agent I griature require	5/2	5/02	
9. This corporation is eligible to saidly thrangible Tax filing requirement and elected a	Jenuary 1 Alle After May 1 Amended	ay 1 Fee is \$150.00 I, Fee is \$550.00 UBR is \$61.25	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
(See criteria on back) 7 7 7 7 7 7 7 7 7 7 7 7 7		e to Department of Sta	ite		
THE PRESIDENT		TITLE		2/01)	
STREET ADDRESS 54 2 2 2 5 7		: STREET ABURESS		CR2E0348 (12/01)	
TITLE VICE-PRES-107	Prince Prince	CRY/ST-ZP		2503	
NAME George Quinn	2 (1.2)	NAME		8	
SIREET ADDRESS CITY-ST-ZIP ST-ZIP ST-ZIP	FL 34134	STREET ADDRESS CITY-ST-ZIP			
TITLE TREASURER	8	TITLE			
NAME UILLGASS STREET ADDRESS		NAME STREET ADDRESS	TOONOT WRIT		
TITLE CLERK		CAY-ST-ZP			
NAME CAZAA Jill Gass	5	TITLE NAME	IN THIS SPAC		
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS: CITY-SI-ZIP			
TITLE DIRECTOR GOOD	Quian	XITLE		<u> </u>	
NAME STREET ADDRESS	4,000	NAME STREET ADDRESS			
CITY-ST-ZIP		CHY-ST-ZIP			
TITLE		TITLE NAME			
NAME STREET ADDRESS		STREET ADDRESS:			
City-ST-ZIP 12. Liverably contifue that the information supplied with the	is Rina does not qualify for t	the exemption stated in S	ection 119.07(3)(i). Florida Statutes, Lfurther certify	that the information	
13. 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 on an attachment with an address, with all other like empowered.					
SIGNATURE:	NTED NAME OF SIGNING OFFICER O	JILL GASS		ne Phone #	

Attachm	eot		A 1 1 1 1 1 1 1
FOR PROFIT OUNIFORM BUSINE	-		fell fill in all
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20 NOT VEITE			page - I never -sow a
2. Principal Place of Business 3300 BbD17A BEACH RD Suite, Apt. J. etc.	3. Mailing Address 5'4 SECONA Suite, Apt. #, etc.	O STREST	Stull you may be
UD 17 # 101 City & State	City & State		all fee Nort write in this space Applied For Applied For
-BDD17A SPRIDGS FL 2ip Country 34/34 USD	<u>BODIZA SPR</u> ^{Zip} 34134	Country U.S.P.	5. Certificate of Status Desired \$8.75 Additional Fee Required
		=Nairec	7. Name and Address of Current Registered Agent
DO NOT W		JIL,	(P.O. Box Number is Not Acceptable)
IN THIS SP		3,54,55	ECOND STRES. 7
		City	Zin Corto
8. The above named entity submits this statement for I	he nuroose of changing its r	### <i>130017</i>	A SPRINGS FL Zip Code 34134
T (0.00	(a)	SV/-17	agent, or both, in the State of Florida.
SIGNATURE Signature, typed or printed name of registered agent and	Jittle f applicable, (NOTE:	Registerea Agent signature require	d when recussing) DATE
9. This corporation is eligible to satisfy its Intangible	January 1 - Ma		
Tax filing requirement and elects to do so. (See criteria on back)	After May 1 Amended	y 1 Fee is \$150.00 Fee is \$550.00 UBR is \$61.25 e to Department of Sta	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
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