2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

May 01, 2003 8:00 am Secretary of State DOCUMENT # P00000085984 05-01-2003 90336 044 ***150.00 1. Entity Name MY ONLINE NEIGHBORHOOD, INC. Mailing Address Principal Place of Business 1235 N. ORANGE AVENUE 1235 N. ORANGE AVENUE SUITE 201 SUITE 201 ORLANDO FL 32804 ORLANDO FL 32804 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-3669133 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent EAGLE, DIANE K-Street Address (P.O. Box Number is Not Acceptable) 1235 N. ORANGE AVE 201 E VANDERBILT ST ORLANDO FL 32804 ANDU 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. I am familiar with, and accept the obligations of registered Kegisteres SIGNATURE! FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State · OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Change Addition TITLE PSD ☐ Detete NAME NAME EAGLE, DONALD 1235 N. ORANGE Ave, Suite 201 STREET ADDRESS STREET ADDRESS 201-E. VANDERBILT STREET CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32804 ORLANDO, FI 32804 Change ☐ Addition ☐ Delete TITLE TITI F **VPTD** NAME NAME DOWNS, KEVIN STREET ADDRESS STREET ADDRESS 1235 N. ORANGE AVENUE CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32804. ☐ Change [] Addition TITI F □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information sopplied 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 of supplemental report is true and securate 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 trustage empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

of the corporation or the receiver or truste changed, or on an attachment with an ad

SIGNATURE

ResiDeNT 4/28/03

FILED