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

## P00000099490 **DOCUMENT #**



## **FILED** Mar 10, 2003 8:00 am & Secretary of State

1. Entity Nam VILLAGE		TIES OF CENTRAL	FLORIDA, INC.				03-10-2003 9009	99 024 ***1	50.00
Principal Place of Business 1304 KETTLEDRUM TRAIL ENTERPRISE FL 32725			Mailing Address 1304 KETTLEDRUM TRAIL ENTERPRISE FL 32725						
2. Principal Place of Business			3. Mailing Address						1 <b>310 13</b> 311 <b>03</b> 11 1001
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State			City & State		<b>4.</b> FI	El Number 59-3679519		Applied For Not Applicable	
Zip		Country	Zip	Соиг	itry	<b>5</b> . C	ertificate of Status Desired	\$8.75 Fee Req	Additional uired
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
			•		Name		,		
Brinkman, Joyce A 1304 Kettledrum Trail			Stre		Street Address	dress (P.O. Box Number is Not Acceptable)			
ENTERPRISE FL 32725									
					City	FL Zip Code			
			r the purpose of changing its	s register	ed office or registe	red age	ent, or both, in the State of Florida.	I am familiar w	ith, and accept
signature	ions of regis	ered agent	Mac			;		3-50	5
STORY TOTAL	Signature, typed	or printed name of registered agent a	and title if applicable. (NO	TE: Registere	d Agent signature require	d when rein	nstating)	DATE	
FILE HOW(1) FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State							Election Campaign Financir     Trust Fund Contribution.		5.00 May Be
Make Uneck	k Pavable to	Elorida Department of	r State			- 1			
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

407.843-5775