Suite, Apt. #, SIG.   Suite   Suite, Apt. #, BIG.   Suite, Apt. #, BIG.   Suite, Apt. #, BIG.   DO NOT WRITE IN THIS SPACE    City & State   F.   4. FEI Number   Applied For   Not Applicable   So. 2,370.52.42   Not Applicable   Not Applicable   So. 2,370.52.42   Not Applicable   So. 2,370.52.42   Not Applicable   Not Applicable   So. 2,370.52.42   Not Applicable   Not Applic	2001 DOCUI  1. Entity Name CLASS AC	MENT	# <b>P00</b> 0		NESS REPO 102691	(UBI	Sep 10, 2001 08:00 AM Secretary of State								
2. Principal Pase of Business   3. Mailling Address   3. Mailling	•		· · · · · · · · · · · · · · · · · · ·		-										
Suite, Apt. #, StC.   Suite   City & State   City & State   City & State   City & State   S.    Zip   Country   Zip   Country   S.    Zip   Country   Zip   Country   S.    Zip   Country   Zip   Satura   S.    Zip   Country   Zip   Satura   S.    Zip   Country   Zip   Satura   Satura Desired   S.    Satura Davida   Satura Dasired   Satura Dasire															
City & State    City & State   City & State   Country   Zign   Country   Sy 3705242   Sectificate of Status Desired   Sy 3705242   Section Status Desired	2. Principal Place of Business														-
Zip   Country   Zip   Country   Zip   Country   Zip   S9-3705242   S. Cartificate of Status Desired   Not Applicable   Status Desired   Not Applicable   Status Desired   Not Applicable   Sea Additional Fee Required   Status Desired   Status D	Suite, Apt.	#, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
Country	City & State				=				I I hearan						
SHANNON DAVID A  5697 RED BUG LAKE RD  WINTER SPRINGS 32768  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.  SIGNATURE  6. 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.  SIGNATURE  9. This corporation is eligible to satisfy its intangible agent and lite if applicable.  9. This corporation is eligible to satisfy its intangible agent and lite if applicable.  10. The state of Florida.  10. Election Campaign Financing Trust Fund Contribution.  10. Election Campaign Financing Trust Fund Contribution.  11. OFFICERS AND DIRECTORS  12. ADDITIONAL CHRISTY  SINGER ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  13. AND  14. STREET ADDITIONS  15. AVAID  16. Election Campaign Financing  Trust Fund Contribution.  16. Election Campaign Financing  Trust Fund Contribution.  17. STREET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  18. AVAID CHRISTY  SIREET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  19. AVAID A  SIREET ADDITIONS  10. Change   Addition  10.	Zip		·		34761	Coun	itry				itus Desired	N	\$8.75 Fee Re	5 Add	itional
SHANNON DAVID A WINTER SPRINGS  WINTER SPRINGS  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.  SCONATURE  9. This corporation is eligible to satisfy its intangible lizar filing requirement and elects to do so.  See criteria on back)  9. This corporation is eligible to satisfy its intangible lizar filing requirement and elects to do so.  Notice of Part on back)  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  WINTER SPRINGS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  WINTER SPRINGS  14. STANNON CHRISTY SIRRETADORS  59. TRD BUG LAKE RD  WINTER SPRINGS  15. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  WILL SHANNON DAVID A  SIRRETADORS  59. TRD BUG LAKE RD  WINTER SPRINGS  16. STANNON DAVID A  SIRRETADORS  50. STANDON DAVID A  50. Change   Addition  MAKE  5	<del> </del>	6. Name	and Address of Co	urrent Re	gistered Agent		Ne		7. Nam	and Addr	ess of New	Registere	d Agent		
S. 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.  SIGNATURE    O9/10/2001							SHANNO Street A	ddress (P.	O. Box N		ot Acceptab	le)	· · · · · ·		<del></del>
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.    19/10/2001											. <u> </u>	F			<u> </u>
Tax filing requirement and elects to do so. (See criteria on back)  After MAY 1 2001 Fee will be \$55000 Trust Fund Contribution.   Added to Fees  ITILE  Delete  TITLE  Addition  Addition				-				-	·		he State of F	- 09/1		1	<u></u>
TITLE D   Delete   SHANNON CHRISTY   STREET ADDRESS   SHANNON DAVID A   STREET ADDRESS   STREET A	Tax filing re	equirement a		-	After MAY 1, 20	01 Fee	will be \$5	550.00	5 4			-			
MAME SHANNON CHRISTY STREET ADDRESS CTTY-ST-ZIP WINTER SPRINGS FL 32708 TITLE Delete TITLE NAME SHANNON DAVID A STREET ADDRESS CTTY-ST-ZIP TITLE NAME STREET ADDRESS CTTY-ST-ZIP TITLE Change Addition	11.		OFFICERS	AND D	RECTORS	12.			ADDITI	ONS/CHAI	NGES TO OF	FICERS AN	ND DIREC	TORS	SIN 11
TITLE D Delete SHANNON DAVID A STREET ADDRESS SAGY RED BUG LAKE RD CITY-ST-ZIP WINTER SPRINGS FL 32708 CITY-ST-ZIP OCOEE FL 34761  TITLE NAME SHANNON DAVID A STREET ADDRESS CITY-ST-ZIP OCOEE FL 34761  TITLE NAME STREET ADDRESS CITY-ST-ZIP COMMANDE STREET ADDRESS C	NAME STREET ADDRESS	SHANNOI 5697 RED	BUG LAKE RD			NAM	E	SHANN			Y		<b>∑</b> Cha	ange	☐ Addition
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STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME STREET ADDRESS				□ Delete	NAM STRE	e et address				_	-	☐ Cha	ange	Addition

09/10/2001 Date

Daytime Phone #

SIGNATURE: CHRISTY D SHANNON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR