FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State
05-15-2002 90093 033 ***150.00

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DOCUMENT # P00000112166

1. Entity Name

Co-Advantage Administrative Services, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
111 W Jefferson St	111 W Jefferson St
Suite, Apt. #, etc. Suite 100	Suite, Apt. #, etc. Suite 100
City & State Orlando FL	City & State Orlando FL
Zip 32801 Country	Zip 32801 Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3707287 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Robbinson, William H JR

Street Address (P.O. Box Number is Not Acceptable): 111 W Jefferson St Suite 100

City: Orlando FL Zip Code: 32801

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	President
NAME	Williams, Payne
STREET ADDRESS	111 W Jefferson St suite 100
CITY-ST-ZIP	Orlando FL 32801
TITLE	Vice President
NAME	Goin, Bruce
STREET ADDRESS	111 W Jefferson Suite 100
CITY-ST-ZIP	Orlando FL 32801
TITLE	Vice President
NAME	Hewitt, Ben
STREET ADDRESS	111 W Jefferson St Suite 100
CITY-ST-ZIP	Orlando FL 32801
TITLE	Secretary
NAME	William Robbinson Jr
STREET ADDRESS	111 W Jefferson St Suite 100
CITY-ST-ZIP	Orlando FL 3280
TITLE	Treasurer
NAME	Wolin, Jay
STREET ADDRESS	111 W Jefferson St Suite 100
CITY-ST-ZIP	Orlando FL 32801
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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: William H. Robbinson Jr 5/01/02 (407) 447-3815
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #