02-2412903 90037 012 \*\*\* 150.00

## 2002 UNIFORM BUSINESS REPORT (UBR)

Zip Country Zip Country 5. Certificate of Status Desired \$8.75 A Fee Required Agent 7. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name  ROACH, EDWARD D 412 W. BELT AVE. BUSHNELL FL 33513  City FL Zip Co  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  Signature, typed or pinted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  9. This corporation is eligible to satisfy its Intangible Tax (liting requirement and elects to do so.  After May 1, 2002, Fee will be \$550.00	ed	
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   DO NOT WRITE IN THIS SPACE	lot Applicable Iditional ed	
City & State  Country  Country  Country  Country  5. Certificate of Status Desired	lot Applicable Iditional ed	
Zip Country Zip Country 5, Certificate of Status Desired \$8.75 A Fee Required Agent 7. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name  ROACH, EDWARD 0 412 W. BELT AVE. BUSHNELL FL 33513  City FL Zip Co  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  9. This corporation is eligible to satisfy its Intengible Tax filing requirement and efects to do so.  (See criteria on back)   Make Check Payabile to Department of State    Defector Road   Road    Title NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR    TITLE NAME STREET ADDRESS   12. ADDITIO	lot Applicable Iditional ed	
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ROACH, EDWARD D 412 W. BELT AVE. BUSHNELL FL 33513  City  City  FL  Zip Co  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  Signature, typed or pirated name of registered agent and title if applicable.  NATE: Registered Agent signature required when reinstating)  DATE  9. This corporation is eligible to satisfy its Intangible Tax (filing requirement and elects to do so.  (See criteria on back)  The OFFICERS AND DIRECTORS  11.  OFFICERS AND DIRECTORS  12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE NAME ROACH, EDWARD D STREET ADDRESS CITY-ST-ZIP  BUSHNELL FL 33513	<b>)O</b> May Be	
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

@ 2-04-02x 352793-8827