2001 UNIFORM BU	SINESS REPO	ORT (UBR)	4/28/01-90006-009 * 9/5/01-90009-01	1-\$550.00-\$550.00		91.0	٠.	
OCUMENT # P00000112595				FILE				
DAVID BATEMAN ENTERPRISES, I	INC.			•			f I	
Principal Place of Business Meiling Address 3564 FANNING BRANCH ROAD 3564 FANNING BRANCH RO		BOAD		01 NOV -9			1	
PERNON FL 32462	VERNON FL 32462	NONU) 	SECRETAR	Y OF ST	TATE DRID	A	
L. Principal Place of Business	3. Mailing Address			88 111 88 111 91 188 1189 1189 1188 1	4 121M (1111 1111)		()	ı
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		OT WRITE IN THIS SPACE				
City & State	City & State	City & State			Applied For Not Applicable	}	:	ı
Zip Country	Zip	Country	5. Certificate of Status De	Fee Requis	red]	İ	ſ
8. Name and Address of Curre	ent Registered Agent	Name	7. Name and Address of	New Registered Agent		1		
BATEMAN, DAVID J 3564 FANNING BRANCH ROAD		Street Addre	ess (P.O. Box Number is Not Acc	eptable)]		
VERNON FL 32462								
The state of the s		City		FL Zip Co	OIE	-	 .	
i. The above named entity submits this statement	fee	IS registered office of reg		S-28-0/	-			I
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOWILL F After September 12, 20 Make Check Payable t		/III FEE IS \$550.00 12, 2001 Fee will be \$7	10. Election Campa		00 May Be	1		l
	ND DIRECTORS	12.	ADDITIONS/CHANGES T	O OFFICERS AND DIRECTOR		1 =	. !!	ı
PRESIDENT, SECT of Treasing Delete DAVID BATEMAN 3564 FANNING BRANCH Rd VENN FL 32462		NAME STREET ADDRESS CITY-ST-ZIP			C) Hadilari	ZE034 (5/01)		I I
itle Iame Theet address	☐ Delete	TITLE NAME STREET ADDRESS	•	☐ Change	Addition	8		
TIY-SI-ZIP TLE: AME TREET ADDRESS	☐ Delete	CITY-ST-ZIP FITLE NAME STREET ADDRESS		Change	Addition			
ITY-ST-ZIP ITLE AME	Delete	CITY-ST-ZIP TITLE NAME		☐ Change	☐ Addition			ı
ireet address ity-St-Zip		STREET ADDRESS CITY-ST-ZIP]		ı
ILE AME TREET ADDRESS ITY-ST-ZIP	☐ Delette	TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ Change	☐ Addition			
TLE MME TREET ADDRESS TY-ST-ZP	☐ Delets	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	-		
I hereby certify that the information supplied windicated on this report or supplemental report of the corporation or the receiver or trustee en changed, or on an attachment with an address.	t is true and accurate and that appowered to execute this repor	or the exemption stated in my signature shall have to t as required by Chapter	he same legal effect as if made i	under oath: that I am an office	r or director			