FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

YR. 2002

P02000113055

FILED
Jul 19, 2002 8:00 A.
Secretary of State

DOCUMENT # P02000113055

1. Entity Name
CONNEXIONS OF CENTRAL FLORIDA, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2041 DUNSFORD DR.	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO, FL 32808	City & State
Zip: 32808 Country: US	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1060661 ☐ 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: COLLINGWOOD-ROWE, ANN

Street Address (P.O. Box Number is Not Acceptable): 2041 DUNSFORD DR

City: ORLANDO FL Zip Code: 32808

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	PD	
NAME	COLLINGWOOD-ROWE, ANN	
STREET ADDRESS	2041 DUNSFORD DR	
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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: _____ 6/30/02 407-298-1658
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OR AUTHORIZED OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

June 03, 2002

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 3214-6327

Dear Sir/Madam:

Re: Connexions of Central Florida, Inc.
Document #: P00000113055

This is to advise that we have not received our 2001 Uniform Business Report in the mail. Unfortunately, as a result, filing of this report was overlooked. We therefore, now enclose the UBR for the year 2002 along with the filing fee of $150.00

We apologize for this error and request the abatement of any associated penalties. Your consideration is appreciated.

Sincerely

Ann Rowe
President