2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

ORLANDO FL 32803

734 S. HAMPTON AVENUE

P01000007855 **DOCUMENT #**

1. Entity Name

Principal Place of Business

734 S. HAMPTON AVENUE

PRENTICE FAMILY INVESTMENT PROPERTIES, INC.



FILED Feb 13, 2003 8:00 am Secretary of State

02-13-2003 90263 028 ***150.00

2. Principles Pace of Business 3. Mailing Address Suite. Apt. #. etc. City 6. State Ci	ORLANDO FL 32803	EL 32803 ORLANDO FL 32803									
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City & State	Suite, Apt. #, etc. Suite, Apt. #, etc.			, etc.		☐ CHECK HERE IF MAKING CHANGES					
S. Certhicase of Status Display Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Name Name Name Name Name Name Name Name Name Name Name Name Name Name Name Name Name Name Name Name Name Name	City & State City & State				4. FEI Number 59-3704925			ı			
MCNAIR, CRAIG D MR. 1250 S. U.S. HIGHWAY 17-92 SUITE 250 LONGWOOD FL 32750 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 Florica. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or circles rare of registered agent. SIGNATURE Signature, typed or circles rare of registered agent. INOTE Registered Agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica is an familiar with, and accept the obligation of registered agent. INOTICE Registered agent. SIGNATURE Registered agent. SIGNATURE Regis	Zip Country Zip			Cou	intry						
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City FL Zip Code	1250 S. U.S. (HIGHWAY 17-92									
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. I am familiar with, and accept the obligations or registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ITILE NAME NAME SIRETADORSS OTY-ST-2P OTHER PRESIDENT ORACLE PRESIDENT OTHER NAME TEAN MC NATA TEAN MC NATA SIRETADORSS OTY-ST-2P OTHER NAME SIRETADORSS OTH-ST-2P	SUITE 250										
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Increby 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 suppliemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytima Phone #