6/2:

## FILED Jul 30, 2002 8:00 am Secretary of State

200	2 UNI	FORM BUS	INESS REP	ÌŔŤ	(UBR)				-	01 Sta	
1. Entity Na	JMENT TRANCE, I	. 0.00	0019314			1	06-	·23-2002		028 ***150.0 1 <b>J V</b>	
Principal Place of Business Mailing Address 8048 CAPE SAN BLAS RD. 8048 CAPE SAN BLAS RD. PORT ST. JOE FL 32456 PORT ST. JOE FL 32456											
2. Principal Suito Apt	Place of Busin	ėsa	3. Mailing Address 7081 Windward Street Suite Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State Port St. Joe, FL			4.	4. FELNOSDER 369_550 1 Applied For Not Applied For Not Applied For				
. Zip Country  6. Name and Address of Current			Zip 32456	Countr Gu 1	y F		Certificate of Status Desired	٥	\$8.75 A	dditional red	
	1470				Name				~		
CUNNINGHAM, JULIA 8048 CAPE SAN BLAS RD. PORT ST. JOE FL 32458					Strest Address (P.O. Box Number is Not Acceptable)						
8. The above neighed entity submits this plannent for the purpose of changing its re					City		ant bash to the State of S	FL	Zip Co	de	
SIGNATURE	BI	printed name of regishered agent a		1	Yos/Jed			6/102	oloz.		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!! After May 1, 2002 Make Check Payable					ill be \$550.0	0 State	10. Election Campaign Fi Trust Fund Contribution			00 May Be id to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZP		AM, JULIA WARD ST., CAPE SAN IOE FL 32456	☐ Dalete	12. FITE NAME STREET CITY-S	AODRESS 1-ZIP	AO	DITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR  Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		ARY Ward St., Cape San OE Fl. 32456	Delete BLAS	TITLE NAME STREET CITY-ST	ADDRESS 1-ZIP		•		Change	☐ Addition S	
TITLE   NAME   STREET ADDRESS CITY-ST-ZIP			Delete	IITLE NAME STREET CITY-SI	ADORESS'	* * .,			☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	•		☐ Delete	TITLE NAME STREET A					Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET A CITY-SI-	ODRESS	,	•	_	Change	Addition :	
of the cold	peration or the or on an attac	receiver or trustee empow ment with an address, wit	is filling does not qualify for to ue and accurate and that my ered to execute this report at hell other like amounted.	s tedniteo S aldustrie	by Chapter 60	same le 07 Morida	19.07(3)(i), Florida Statutes. I gal effect as if made under o a Statutes; and that my name	ath; that I ai appears in	n an officer of Block 11 or	or director Block 12 if	

## P810000 19319 40150

The Entrance, Inc.

8048 Cape San Blas Rd.

Port St. Joe, FL 32456

June 20, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Enclosed please find the 2002 Uniform Business Report and a check for \$150.00 for payment of my 2002 corporate filing fee.

Phone (850) 227-7529 Fax (850) 229-9511

The report was mailed to my store address and a previous store employee apparently neglected to deliver the report to me. One of my employees came across the report today when sorting through some paperwork she found at the store.

I sincerely apologize for the delinquency of the report and ask that you please abate, or reduce, the \$400.00 penalty for filing late. I have changed the form to reflect the proper corporate mailing address.

Thank you for your time and consideration.

Sincerely,

Gary Settle Director

Enclosures: 2002 Uniform Business Report

Check #2080 for \$150.00