## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

UN	003 FOR PROFI	SS REPORT		FILED Apr 21, 2003 8:00 am Secretary of State	√0012632 1
1. Entity Nam	MENT # P0100 CRANSTON, P.A.	00031645		04-21-2003 91053 011 ***150.00	
875 DERBYSH	e of Business IIRE ROAD #102 ACH FL 32117	Mailing Address 875 DERBYSHIRE ROAD #1 DAYTONA BEACH FL 32117	· <del>-</del> ·		
	lace of Business	3. Mailing Address			
Suite, Apt.	#, etc.	22 Ethel Suite, Apt. #, etc.	LANC	☐ CHECK HERE IF MAKING CHANGES	
City & Stat	Coast FL	City & State  PAIM COQST	FL	4. FEI Number S9-3706060 Applied For Not Applied by	•
Zip 32/64 100	Country 45 A	7276 c/	Country  (1-5A-	5. Certificate of Status Desired	7
<u> </u>	6. Name and Address of Current			7. Name and Address of New Registered Agent	
BROCK, J	IEFFREY P		Name Street Address	(P.O. Box Number is Not Acceptable)	-
444 SEABREEZE BOULEVARD SUITE 900				<u> </u>	-
DAYTONA BEACH FL 32118			City	FL Zip Code	-
the obligat	ions of registered agent.  Signature, typed or printed name of registered agent.	David B.		Pred agent, or both, in the State of Florida. I am familiar with, and accept   President  - 15-03	
After	ILE NOW!!! FEE IS \$150.00 · May 1, 2003 Fee will be \$550.00 · Payable to Florida Department of	f State		9. Election Campaign Financing Trust Fund Contribution. S5.00 May Be Added to Fees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	7
TITLE	Р	☐ Delete	TITLE	☐ Change ☐ Addition	୍ଧି ହି
NAME Street Address   City-St-Zip	CRANSTON, DAVID B 875 DERBYSHIRE RD #102 DAYTONA BEACH FL 32117		NAME STREET ADDRESS CITY-ST-ZIP		5034 (10/02)
TITLE NAME	A A	Delete	TITLE NAME	☐ Change ☐ Addition	CR2E034
STREET ADDRESS CITY-ST-ZIP	7		STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	Change Addition	-
CITY-ST-ZIP TITLE	:	□ Delete	CITY-ST-ZIP	☐ Change ☐ Addition	-
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP		
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	-
TITLE NAME STREET ADDRESS	·	☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition	
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for the	he exemption stated in S	ection 119.07(3)(i), Florida Statutes. I further certify that the information	

SIGNATURE:

of the corporation or the receiver or trustee empichanged, or on an attachment with an address

ered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 in