2002 Uniform Business Report (UBR)

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Principal Place of Business Mailing Address RT 2 BOX 275-7 HIGH SPRINGS FL 32643 Mailing Address RT 2 BOX 275-7 HIGH SPRINGS FL 32643						::			¥6.		
2. Principal F	Place of Busine	ess	3. Mailing Address								•
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					-
City & Stat	te		City & State			4. FEI Number 59 - 3	175459			plied For t Applicable]
Zip		Country	Zip	Coun	try	5. Certificate of S		Fee	.75 Addi	itional 1 	
	6. Name a	and Address of Current R	egistered Agent		Name V.		dress of New Reg	istered Age	<u></u>		1
BUSINESS FILINGS INCORPORATED					Street Addres	M BERLY M. ss (P.O. Box Number is	Not Acceptable)	<u></u>			-
ſ	ST AVENUE				RT	2 Box 27	5-7				1
MIAMI BE	ACH FL 331	39			City 11.	64 SPRINGS		FL	Zip Code		$\left\{ \right.$
9 The above	namod entity	submits this statement for t	he purpose of changing its	registers			the State of Florid		2264	3	1
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SIGNATURE		r printed name of egistered agent and	title if applicable. (NOT	TE: Registered	Agent signature requ	uired when reinstating)		2-//-0 DATE	<u></u>		
-	Signature, typed o	r printed name of posistered agent and	d title if applicable. (NOT			uired when reinstating)	n Campaign Figur	DATE			
9. This corpo	Signature, uped or oration is eligible requirement ar	J	FILE NOW After May 1, 20	!!! FEE 002 Fee	IS \$150.00 will be \$550.0	0 10. Electio	n Campaign Finan- und Contribution.	DATE	\$5.00	0 May Be to Fees	
9. This corpo	Signature, ped or oration is eligib	ole to satisfy its Intangible	FILE NOW After May 1, 20 Make Check Paya	!!! FEE 002 Fee	IS \$150.00 will be \$550.0	0 10. Electio Trust F	, -	cing	\$5.0 (Added	to Fees	
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SIGNATURE: <u></u>

RUMWAJIRED MOW SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR