## 562787 AV

FILED Apr 25, 2003 8:00 am

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

SIGNATURE:

DOCU  1. Entity Nam  RESCREE		0006	3550			Secretary of State 04-25-2003 90195 031 ***150.00				
Principal Place of Business 15662 FRUITVILLE RD. SARASOTA FL 34240			15662	ng Address PRUITVILLE RD. SOTA FL 34240						
2. Principal F	Place of Busi	ness	3. Mai	iling Address		-				
Suite, Apt. #, etc.			Suit	e, Apt. #, etc.	········		CHECK HERE IF MAKING CH	HANGES		
City & State			City	& State		4.	4. FEI Number 65-1119590 Applied For Not Applicable			
Zip		Country	Zip -		Country		Fee	3.75 Add e Required	itional	
	6. Name	and Address of Current	Register	ed Agent		7. Name and Address of New Registered Agent				
				Name	Name					
HUDDLESTON, RICKEY E <sup>*</sup> 15662 FRUITVILLE RD. (**)					Street Address	Street Address (P.O. Box Number is Not Acceptable)				
	A FL 34240	- <del>1</del> 3°								
					City	Zip Code				
the obligat	tions of regis ಪ		or the purp	ose of changing its	registered office or registe	ered aç	gent, or both, in the State of Florida. I am fam	iliar with, a	and accept	
SIGNATURE	Signature, typed	or printed name of registered agent	and title if app	olicable. (NOTE	: Registered Agent signature require	ed when	reinstating) DATE			
Afte	r May 1, 200	I! FEE IS \$150.00 03 Fee will be \$550.00 o Florida Department o	f State				9. Election Campaign Financing Trust Fund Contribution.		<b>0</b> May Be to Fees	
10.		OFFICERS AND	DIRECTO	RS	11.	Αl	DDITIONS/CHANGES TO OFFICERS AND DI	RECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	15662 FRI	TON, RICKEY E JITVILLE RD. A FL 34240		Delete .	TITLE NAME STREET ADDRESS CITY-ST-ZIP			] Change	☐ Addition	
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indicated of the cor	on this report poration or the	t or supplemental report is	true and owered to	accurate and that me execute this report a	y signature shall have the	same	n 119.07(3)(i), Florida Statutes. I further certify legal effect as if made under oath; that I am a rida Statutes; and that my name appears in Blo	an officer o	or director {	