2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 AM
Secretary of State

DOCUMENT# P01000067992

Entity Name: CERTILAWN, INC.

Current Principal Place of Business:

4345 DEERWOOD TRAIL
MELBOURNE, FL 32934

New Principal Place of Business:

25-B S WICKHAM ROAD
W.MELBOURNE, FL 32904

Current Mailing Address:

4345 DEERWOOD TRAIL
MELBOURNE, FL 32934

New Mailing Address:

P.O. BOX 360617
MELBOURNE, FL 32936

FEI Number: 59-3743583 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEEGMILLER, MELVIN R
4345 DEERWOOD TRAIL
MELBOURNE, FL 32934

Name and Address of New Registered Agent:

STEEGMILLER, CONSTANCE DIR
4345 DEERWOOD TRAIL
MELBOURNE, FL 32934

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.

SIGNATURE: CONSTANCE STEEGMILLER 04/23/2002
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STEEGMILLER, MELVIN R
Address: 4345 DEERWOOD TRAIL
City-St-Zip: MELBOURNE, FL 32934

Title: D ( ) Delete
Name: STEEGMILLER, CONSTANCE
Address: 4345 DEERWOOD TRAIL
City-St-Zip: MELBOURNE, FL 32934

Title: D ( ) Delete
Name: WRIGHT, SHIRLEY
Address: 766 LIME AVE NW
City-St-Zip: PALM BAY, FL 32907

Title: D ( ) Delete
Name: HARE, THOMAS A
Address: 410 SAUL AVE SW
City-St-Zip: PALM BAY, FL 32908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHIRLEY A WRIGHT DIR 04/23/2002
Electronic Signature of Signing Officer or Director Date