

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000095235

FILED
Jul 24, 2002
Secretary of State

Entity Name: FACE PLATES, INC.

Current Principal Place of Business:

9409 PALM TREE DR STE 600
WINDERMERE, FL 34786

New Principal Place of Business:

9409 PALM TREE DR
SUITE 600
WINDERMERE, FL 34786

Current Mailing Address:

9409 PALM TREE DR STE 600
WINDERMERE, FL 34786

New Mailing Address:

9409 PALM TREE DR
SUITE 600
WINDERMERE, FL 34786

FEI Number: 59-3745673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNCH, ROBERT
9409 PALM TREE DR STE 600
WINDERMERE, FL 34786

Name and Address of New Registered Agent:

LYNCH, ROBERT
9409 PALM TREE DR
WINDERMERE, FL 34786

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:

07/24/2002

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: PSD () Delete
Name: LYNCH, ROBERT
Address: 9409 PALM TREE DR STE 600
City-St-Zip: WINDERMERE, FL 34786

Title: SD () Delete
Name: CURTIS, JAMES
Address: 4486 DAUGHARTY
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: LYNCH, ROBERT
Address: 9409 PALM TREE DR
City-St-Zip: WINDERMERE, FL 34786

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: ROBERT LYNCH

PSD

07/24/2002

Electronic Signature of Signing Officer or Director

Date