2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P01000101938 DOCUMENT # 1. Entity Name



FILED Mar 31, 2003 8:00 am § Secretary of State
03-31-2003 90295 017 ***150.00

ENVISION PROPERTIES, INC.					
Principal Place of Business 1594 EASTLAKE WOODLANDS PARKWAY OLDSMAR FL 34677	Mailing Address 1594 EASTLAKE WOODLANDS PARKWAY OLDSMAR FL 34677				

OLDSMAR FL			OLDSMAR FL 34677								
2. Principal P	lace of Busin	iness 3. Mailing Address					1 1801(89) 411 44141 41811 8841(8816) 85191	11611 9010(1191 9 (818	# (61 8 1 1 8 61 1 81 1		
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.						CHECK HERE IF MAKING CHANGES				
City & State	ity & State City & State					4.	4. FEI Number 74-3056643 Applied For Not Applicable				
Zip		Country	Zip		Country			5. Certificate of Status Desired S8.75 Additional Fee Required			
·	6. Name	and Address of Curren	t Registere	ed Agent		7. Name and Address of New Registered Agent					
				-	Name						
BECKLUND, MARIE M											
	•	ODLANDS PARKWAY				Street Address (P.O. Box Number is Not Acceptable)					
							10.		···	,	
OLDSMAR FL 34677					City			FL Zip Coo	le l		
8. 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. I am familiar with, and accept											
the obligati	ions of regist	tered agent.	or the parp	ooo or onanging to	ogiotori	ca omes or	rogiotoroa a	gent, or both, in the state of Alexand	an ama wa,	and docupt	
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SIGNATURE .	Signature typed	or printed name of registered ager	t and title if and	NOTE:	Recietore	d Apont pignatu	e required when	reinstation)		 í	
			it and bue it app	I (NOTE	. Hogistere		e required writeri	Tellistating)			
		!! FEE IS \$150.00						9. Election Campaign Financing	\$5.0	00 May Be	
	• •	3 Fee will be \$550.00						Trust Fund Contribution.		d to Fees	
Make Check Payable to Florida Department of State						<u> </u>					
10.		OFFICERS ANI	DIRECTO		11.		Al	DDITIONS/CHANGES TO OFFICERS			
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.