

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90090 038 ***150.00

DOCUMENT # P01000112782

1. Entity Name

LEAD, INC., OF CENTRAL FLORIDA

Principal Place of Business

Mailing Address

725 GOLDWYN AVE. STE. B
 ORLANDO, FL 32805

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

USA

Zip

Country

4. FEI Number

59-3759842

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75

Additional

Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIPLIN, GARY A

3007 SEABROOK AVE
 ORLANDO, FL 32805

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Date

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

\$5.00

Trust Fund Contribution.

May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
 NAME EASON, JON L.
 STREET ADDRESS 725 S GOLDWYN AVE., STE B
 CITY - ST - ZIP ORLANDO, FL 32805

Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

Change

Addition

TITLE V
 NAME BERKELEY, LESLIE
 STREET ADDRESS 725 S GOLDWYN AVE STE B
 CITY - ST - ZIP ORLANDO, FL 32805

X Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

Change

Addition

TITLE S
 NAME DANDY, DAVID
 STREET ADDRESS 725 S GOLDWYN AVE., STE B
 CITY - ST - ZIP ORLANDO, FL 32805

X Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

Change

Addition

TITLE T
 NAME HARRIS, MARGARET
 STREET ADDRESS 725 S GOLDWYN AVE, STE B
 CITY - ST - ZIP ORLANDO, FL 32805

X Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

Change

Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

X Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

Change

Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

Change

Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4-30-02

Date

Daytime Phone #

CR2E034 (9/99)