

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 10, 2003 8:00 am
Secretary of State

01-10-2003 90034 046 ***150.00

DOCUMENT # P02000005494

1. Entity Name
WRITENOW COMMUNICATIONS INC.



Principal Place of Business
**10 NE 6TH ST.
DELRAY BEACH FL 33444**

Mailing Address
**10 NE 6TH ST.
DELRAY BEACH FL 33444**

2. Principal Place of Business
**1860 Forest Hill Blvd.
Suite, Apt. #, etc.
Suite 204**

3. Mailing Address
**1860 Forest Hill Blvd
Suite, Apt. #, etc.
Suite 204**

City & State
West Palm Beach, FL

City & State
West Palm Beach, FL

Zip
33406

Country
USA

Zip
33406

Country
USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number
010582817

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SISSON, LARRY
218 SOUTHERN COUNTRY LN.
QUINCY FL 32351**

7. Name and Address of New Registered Agent

Name
Caryn L. Stumpf
Street Address (P.O. Box Number is Not Acceptable)
**10 Northeast Sixth St.
Delray Beach, FL**
City
FL Zip Code
33444

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 obligations of registered agent.

SIGNATURE Caryn L. Stumpf President, Caryn L. Stumpf 1/7/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make: Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BURRUS, HAYDEN
10 NE 6TH ST.
DELRAY BEACH FL 33444** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
STUMPF, CARYN L
9892A BOCA GARDENS PKWY.
BOCA RATON FL 33496** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**President
Caryn L. Stumpf
10 Northeast Sixth St.
Delray Beach, FL 33444** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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.

SIGNATURE: Caryn L. Stumpf 1/7/03 561-330-3805
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)