2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000008935

1. Entity Name
Building Blocks of Ocala North, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JUN 17 PM 2:25

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
8274 Coconut Blvd. West Palm Beach, FL 33412	8274 Coconut Blvd. West Palm Beach, FL 33412

2. Principal Place of Business — Suite, Apt. #, etc. — City & State — Zip — Country
3. Mailing Address — Suite, Apt. #, etc. — City & State — Zip — Country

4. FEI Number 37-1417895 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
Alan T. Strickland
8274 Coconut Blvd.
West Palm Beach, FL 33412

7. Name and Address of New Registered Agent
Name
Street
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) ✓

10. Florida Recreation Financing ... $5.00 May Be Added to Fees ☐

Title / Name / Street Address / City-St-Zip		Title / Name / Street Address / City-St-Zip	
President Alan T. Strickland 8274 Coconut Blvd. West Palm Beach, FL 33412	☒ Delete		
Secretary Alan T. Strickland 8274 Coconut Blvd. West Palm Beach, FL 33412	☒ Delete	Secretary / President Rhonda Strickland 8274 Coconut Blvd. West Palm Beach, FL 33412	☐ Change ☒ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition

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-06/25/02--01047--002
****140.00 ****70.00

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: Rhonda Strickland Rhonda Strickland 6/17/02 561 723-8715
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #