## FILED Jul 14, 2003 8:00 am Secretary of State

2003	FOR	PROFIT C	ORPORAT	LION
UNIFOI	RM B	USINESS	REPORT	(UBR)

1. Entity Nam		0018338				14-2003 90344 0			
Principal Plac 5221 RIVER PA JACKSONVILLE	ARK RD.	Mailing Address 5221 RIVER PARK RD. JACKSONVILLE FL 32277							
2. Principal P	lace of Business	-	IO 18011 ODBII <b>So</b> ill Odbii <b>50</b> 11						
Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES				
City & Stat	·	300			4. FELNumber 82-05	51-549	N	pplied For ot Applicable	
Zip	Country 2	Zip	Coun	try	5. Certificate of Sta		\$8.75 Ade		
	6. Name and Address of Current F	legistered Agent		Name	7. Name and Addre	ess of New Registere	d Agent		
COLLINS.	STACY_L	نىيىدىن دىر							
5221 RIVER PARK RD. JACKSONVILLE FL 32277				Street Address	ess (P.O. Box Number is Not Acceptable)				
-				City		F	L Zip Cod	e	
	named entity submits this statement for ions of registered agent.  Signature, typed or payled figure of registered agent are	alla_		ed office or registe d Agent signature require		ne State of Florida. I ar		and accept	
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State					S. Election Campaign Financing     Trust Fund Contribution.     Added to Fees				
10.	OFFICERS AND D		11.		ADDITIONS/CHAN	GES TO OFFICERS A	·		
STREET ADDRESS	COLLINS, STACY L 5221 RIVER PARK RD. JACKSONVILLE FL 32277	☐ Delete	•	i			☐ Change	☐ Addition	
NAME STREET ADDRESS	D COLLINS, STEVEN M 5221 RIVER PARK RD. JACKSONVILLE FL 32277	☐ Delete		I			Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			V		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		j.			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		1			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	CITY-	E ET ADDRESS - ST- ZIP			☐ Change	Addition	
<ol><li>12. Thereby c</li></ol>	ertify that the information supplied with t	nis filing does not qualify for t	me exei	mption stated in Si	ection 119.07(3)(i), Flori	da Statutes, I further o	ertity that the ii	ntormation	

In hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(), 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.

GNATURE:

GNATURE:

SIGNATURE:

Alachment #

AA Ace Lock & Key Inc FO Box 11726 Jacksonville, FL 32239 904-744-1050 90142546 POLDOO018338

Division of Corporations Uniform Business Report Filings FO Box 1500 Tallahassee, FL 32302-1500

July\_9,2003=

To Whom It May Concern,

This is to inform you this is the first notice I have received for my renewal of my corporation. Since this is the first time I have ever formed a corporation I have been waiting for the renewal to come in the mail. I will mark my calendar for renewal time to look for no later than April next year or I will notify you.

Flease accept this \$150.00 this one time.

BUT THE COMMITTEE WAS A THE THE RESIDENCE

<u>परक्रियों, भी कर्ताची स्थार एकी राम के राजवानकों राम कुँ एक प्रयास्त्राध्यक्ष विभावक के जिल्ला है मेर अन्य वैकार स</u>

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Thank-you

Stacy Collins

President