## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

19974 SW MAGNOLIA AVE.

**BLOUNTSTOWN FL 32424** 

P02000029876 **DOCUMENT #** 

1. Entity Name

Principal Place of Business

SIGNATURE:

16875 NW MAPLE STREET

**BLOUNTSTOWN FL 32424** 

ONCÉ REMEMBERED GIFTS INC.



## FILED Feb 12, 2003 8:00 am Secretary of State 02-12-2003 90134 022 \*\*\*150.00

Daytime Phone #

2. Principal Place of Business  30033 Central Fue W  Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State  Nowestown, Fl		City & State Blankstom 1 Fl		4. FEI	l Number		<u> </u>	lied For Applicable
スライン (7.00~	Country	Zip	Country	.	rtificate of Status		\$8.75 Addit	
<u> </u>	6. Name and Address of Current I	Registered Agent		7. Na	me and Address	of New Registere	d Agent	
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SMITH, LEA	Street Addre	Street Address (P.O. Box Number is Not Acceptable)						
19974 SW	Magnolia ave.							
BLOUNTST	OWN FL 32424							
			City		<del>-</del>	F	Zip Code	
	named entity submits this statement fo		-agistored office of regi	istered ager	at or both, in the	State of Florida 1 a	am familiar with, a	ind accept
8. The above	named entity submits this statement fo ons of registered agent.	r the purpose of changing its	registered diffice of regi	stered ago	in or bosin in the			
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SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Agent signature rec	quired when rein:	stating)	DA	TE	
. FI After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00					mpaign Financing Contribution.		May Be to Fees
Make Check	Payable to Florida Department of	f State		<u>l</u> _		ES TO OFFICERS	AND DIRECTORS	EINL11
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***	DUGGAR, LINDA 20018 SW MAGNOLIA AVE.		STREET ADDRESS					
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CITY-ST-ZIP	certify that the information supplied w	ith this filing does not qualifur		in Section	119.07(3)(i), Flori	da Statutes. I furth	er certify that the	information
indicate	certify that the information supplied wid on this report or supplemental report or provided in the receiver or trustee emd, or on an attachment with an address	nowered to execute this repo	rt as required by Chapte	e the same er 607, Flori	legal effect as if r da Statutes; and	nade under oath; t that my name app	nat I am an officei ears in Block 10 o	r Block 11 if