## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # P02000082340  1. Entity Name KEW GARDENS COMMITTEE, INC.             |  |   |                                       |                                    | 03 APR 24 AM 9: 53  |          |  |
|---|--|---|---------------------------------------|------------------------------------|---|----------|--|
| Principal Place of Business<br>2544 BLAIRSTONE PINES DR<br>TALLAHASSEE FL 32301 | 2544   | Mailing Address<br>2544 BLAIRSTONE PINES DR<br>TALLAHASSEE FL 32301 |                                       |                                    | SECRETARY OF STATE<br>YALLAHASSEE, FLORIDA  |          |  |
| 2. Principal Place of Business  | <b>3.</b> Mai                                  | ling Address  |                                       |                                    |   |          |  |
| Suite, Apt. #, etc.   | Suit   | Suite, Apt. #, etc.   |                                       |                                    | CHECK HERE IF MAKING CHANGES  |          |  |
| City & State ,  | City   | City & State  |                                       |                                    | 4. FEI Number Applied For<br>22 – 3859765 Not Applicable                            | <b>=</b> |  |
| Zip C   | ountry Zip                                     |   | Country                               |                                    | 5. Certificate of Status Desired  |          |  |
| 6. Name and   | Address of Current Registere                   | d Agent   |                                       |                                    | 7. Name and Address of New Registered Agent   | ]        |  |
| MEVEDO DOMALD O CO  |  |   | Name                                  |                                    | •   | 1        |  |
| MEYERS, RONALD G ES<br>2544 BLAIRSTONE PINE<br>TALLAHASSEE FL 32301             |  | Street A  | ddress (P.                            | P.O. Box Number is Not Acceptable) | 1   |          |  |
| TALLATIAGGLE 1 E 02001  |  |   | City                                  |                                    | FL Zip Code   | +        |  |
| 8. The above named entity sub<br>the obligations of registered                  |  | ose of changing its rec   | gistered office o                     | registered                         | ed agent, or both, in the State of Florida. I am familiar with, and accept          |          |  |
| SIGNATURE   | sted name of registered agent and title if app | licable. (NOTE: Re  | egistered Agent signat                | ure required w                     | when reinstating) DATE  |          |  |
| FILE NOW!!! F<br>After May 1, 2003 F<br>Make Check Payable to Flo               | ee will be \$550.00                            |   |                                       |                                    | 9. Election Campaign Financing Trust Fund Contribution. S5.00 May Be Added to Fees  |          |  |
| 10.   | OFFICERS AND DIRECTO                           |   | 11.                                   | Т                                  | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                   | ┨,       |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | ,  | □ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2544                               | ☐ Change 【A Addition<br>r, Ronald G.<br>Blairstone Pines Drive<br>ahassee, FL 32301 |          |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  | ☐ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP | T<br>Reed,<br>1713                 | ☐ Change 【 Addition<br>, Sumner<br>Mahan Drive<br>ahassee, FL 32308                 |          |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  | □ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP | -  <del>a   + a</del>              | a∏dSSee, FL 323U8 ☐ Change ☐ Addition   |          |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  | ☐ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP |                                    | □ Change □ Addition 900018452149 05/07/0301057-\016 **150.00                        |          |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                  |  | ☐ Delete  | TITLE NAME STREET ADDRESS CHY-ST-ZIP  |                                    | Cherrige □ Addition   | 7        |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  12.   hereby certify that the info       | ormation supplied with this filing             | ☐ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ted in Sect                        | Change Addition   |          |  |

poly 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 en powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if ress, with all other like empowered. of the corporation or the receiver or trest changed, or on an attachment with an ac-

SIGNATURE:

RONALIGIE Meyer, President

4/22/03

(850) 878-5212 Daytime Phone #