

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 08, 2003 8:00 am
Secretary of State

08-08-2003 90092 049 ***150.00

DOCUMENT # P02000105052

1. Entity Name
GRASSROOTS STRATEGIES, INC.



Principal Place of Business
**552 SPRING LAKE DRIVE
MELBOURNE FL 32940**

Mailing Address
**552 SPRING LAKE DRIVE
MELBOURNE FL 32940**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

47-0890001

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PEDICINI, ANTHONY J III
552 SPRING LAKE DRIVE
MELBOURNE FL 32940**

Name

Street Address (P.O. Box Number is Not Acceptable)

552 SPRING LAKE DRIVE

City

MELBOURNE

FL

Zip Code
32940

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☐ Delete
NAME **ANTHONY J PEDICINI III**
STREET ADDRESS **552 SPRING LAKE DRIVE**
CITY-ST-ZIP **MELBOURNE FL 32940**

TITLE **PRESIDENT** ☐ Change ☒ Addition
NAME **ANTHONY J PEDICINI III**
STREET ADDRESS **552 SPRING LAKE DRIVE**
CITY-ST-ZIP **MELBOURNE, FL 32940**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/1/03

850-251-7509

Date

Daytime Phone #

CR2E034 (4/03)

Attachment
80137005
PO2000105052

GRASSROOTS STRATEGIES, INC.

662 Spring Lake Drive • Melbourne • Florida • 32940
(321) 255-7888 • (860) 261-7608

August 1, 2003

Division of Corporations
Uniform Business Report Filings
PO BOX 1500
Tallahassee, Florida 32302-1500

To Whom It May Concern:

Please allow this letter to serve as notice that the 60 day filing warning my company, Grassroots Strategies, Inc., received was the first and therefore, in accordance with the rules of the Division of Corporations I ask that the late fee be waived.

Thank you for your cooperation regarding this matter.



Anthony J Pedicini
President
Grassroots Strategies, Inc.