2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 23, 2003 8:00 am Secretary of State 04-10-2003 90105 013 ***158.75

1. Entity Nan		0120223	V		04-10-2003 90103	, 013	136.73	
Principal Place of Business 8917 WESTERN WAY STE 6 JACKSONVILLE FL 32256		Mailing Address 8917 Western Way Ste 6 Jacksonville FL 32256			T 		1 11101 NA 1111	
2. Principal Place of Business		3. Mailing Address				6 HARIA (1 4 MA)		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 116747	h	pplied For lot Applicable	•
Zip Country		Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current R	egistered Agent		41-	7. Name and Address of New Registered	Agent	 -	-
	بالسندوالتي تواديا يتيان		-	Name	e			1
HOLM, MALLORY G 50 N LAURA ST STE 2800				Street Address (P.O. Box Number is Not Acceptable)]
JACKSON	MILLE FL 32202				<u> </u>			
				City '	FI].
8. The above the obligat	named entity submits this statement for t ions of registered agent.	he purpose of changing its	register	ed office or register	ed agent, or both, in the State of Florida. I am	familiar with	, and accept	
SIGNATURE	Signature, typed or printed name of registered egent and	d title if applicable. (NOT	E: Registers	d Agent signature required	when reinstating) DATE		The second	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State			, .u.s	- 10	9. Election Campaign Financing Trust Fund Contribution. [\$5.0 Adde	00 May Be d to Fees	1
i	OFFICERS AND D				ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 11	1
TITLE "	D COLEY, W ALEX	☐ Delete	TITL			☐ Change	☐ Addition	188
STREET ADORESS CITY+ST-ZIP	8917 WESTERN WAY STE 6 JACKSONVILLE FL 32256		STRE	ET ADDRESS -ST-ZIP				CR2E034 (10/02)
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CITY-ST-ZIP TITLE	JACKSONVILLE FL 32256	☐ Delete	TITLE	-ST-ZIP	<u> </u>	☐ Change	☐ Addition	ł
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12. I hereby c	ertify that the information supplied with the	is filling does not qualify for	the exer	nption stated in Sec	ction 119.07(3)(i), Florida Statutes. I further car	tify that the in	nformation	1

Indicated on this report or supplemental/sport is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this sport 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: