2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)



FILED Mar 03, 2003 8:00 am Secretary of State

1. Entity Nam	ne	# PU200 LLE COMPANY	0133122			03-03-2003 90448		
Principal Plac	e of Busines	SS	Mailing Address	 		1		
3800 MOBILE HWY			3800 MOBILE HWY			-		
PENSACOLA FL 32505			PENSACOLA FL 32505					
		-		•		I INCHEST IN ACHO MON BON ACHI ADIO I	ana iona criacara	# 1(818 (18) (80)
2. Principal Place of Business			3. Mailing Address					
Suite, Apt. #, etc.			Suite, Apt. #, etc.	- · <u> </u>		CHECK HERE IF MAI	(ING CHANGE	is
City & State			City & State			4. FEI Number Applied For 82 - 0576758 Not Applied		
Zip	مشيعين س	Country	Zip	Country			\$8.75 A	Not Applicable Additional
	6. Name	and Address of Current	Registered Agent			7. Name and Address of New Register	,	100
				Name	9			
HOVANESIA			Stree	Street Address (P.O. Box Number is Not Acceptable)				
16 PORT ROYAL WAY					(which teoephable)		
PENSACOL	A FL 3250	1-5774						
				City			Zip Co	ode
8. The above r	named entity	y submits this statement for	the purpose of changing	its registered office	or registere	ed agent, or both, in the State of Florida.	am familiar with	n and accept
the obligation	ons of regist	ered agent.		-	•	or again, in the state of horizon.	YILL SCHINGL AND	i, and accept
SIGNATURE								
	Signature, typed	or printed name of registered agent a	nd title if applicable. (N	NOTE: Registered Agent sig	nature required v	when reinstating) DA	re	
After	May 1, 200	! FEE IS \$150.00 33 Fee will be \$550.00 Florida Department of	State			Election Campaign Financing Trust Fund Contribution.		00 May Be ed to Fees
10.		OFFICERS AND D	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 11
TITLE			☐ Delete	TITLE	Ph	es. a T		
NAME STREET ADDRESS				NAME	AK	Thur C BUNION 11 STAR LAKE DL	•	-
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS		rsacola FL. 3250	ח	
TITLE				CITY-ST-ZIP	-	3,717,717		
NAME			☐ Delete	TITLE NAME			☐ Change	Addition
STREET ADDRESS				STREET ADDRESS		•		
CITY-ST-ZIP	~		The second second	CITY-ST-ZIP		-		
TITLE		·	☐ Delete	TITLE		The second secon	Change	☐ Addition
NAME		•		NAME -			onding¢	Addition
STREET ADDRESS				STREET ADDRESS	;]	4.		
CITY-ST-ZIP		,	 -	CITY-ST-ZIP				
TITLE			☐ Delete	TITLE			☐ Change	☐ Addition
NAME				NAME				
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS				
				CITY-ST-ZIP				
TITLE NAME			☐ Delete	TITLE			☐ Change	Addition
TREET ADDRESS				NAME				ľ
CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP		•		}
ITLE			——————————————————————————————————————					
AME			Delete	TITLE	1		Change	☐ Addition
TREET ADDRESS				NAME STREET ADDRESS				
ITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP				
of the corpo	ration or the	information supplied with the or supplemental report is to receiver or trustee empowherent with an address, with the control of the control o	ered to execute this renor	or the exemption statement of the exemption of the exempt	Lated in Secti have the sar apter 607, F	ion 119.07(3)(i), Florida Statutes. I further on the legal effect as if made under oath; that florida Statutes; and that my name appears 247662003	ertify that the in I am an officer s in Block 10 or	nformation or director r Block 11 if

Chiste Burton III 1-850-432-0491