

9/10/2004-90001-013-\$150.00-\$150.00

FILED

04 OCT -7 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[illegible]

07202004 Chg-P CR2E034 (10/03) 09

4. FBI Number	27-0105589	Applied For
		Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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 reconstituting)

DATE _____

FILE NOW!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

In accordance with s. 607.183(2)(b), F.S., the corporation did not receive the prior notice.

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Sheila Conhasselt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIS

Sheila Lenhardt

9/3/04 (727) 599-2192

Daytime Phone #
(727) 284-0494
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