## 2001 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nam	MENT # P36931 ORLANDO, INC.	l		ļ	/	Secretal 07-31-2001 90	ry of	Stat	æ
-Principal Place of Business 1301 CENTRAL PARK DR SANFORD FL 32771-6638 US		Mailing Address 1301 CENTRAL PARK DR SANFORD FL 32771-6638 US					, o z z o		
2. Principal Place of Business		3. Mailing Address				† 10011081 100 11510 01110 10100 1	(IE) (IE) (IE) <b>(</b>	II BIBIF BIBII B	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE					
City & State		City & State			4. FE!	Number <b>59-309842</b> 4	1		plied For t Applicable
Zip	Country	Zip	Country			rtificate of Status Desired		8.75 Add ee Required	
	6. Name and Address of Current Re	gistered Agent	Nam	e	7. Nan	ne and Address of New F	Registered A	jent	
	PORATION SYSTEM				(P,O. Box Number is Not Acceptable)				
	JTH PINE ISLAND ROAD ON FL 33324								
;			City				FL	Zip Code	;
8. The above	named entity submits this statement for the	ne purpose of changing its re	gistered offici	e or registere	ed agent	t, or both, in the State of Fl	orida.		
SIGNATURE .									
_	Signature, typed or printed name of registered agent and	<del>-</del>	Registered Agent si	- '	when reinst	(ating)	DATE		
<ul> <li>9. This corporation is eligible to satisfy its Intangible         Tax filing requirement and elects to do so.     </li> <li>(See criteria on back)</li> </ul>		FILE NOW!!! FEE IS \$550.00  After September 12, 2001 Fee will be \$750.  Make Check Payable to Department of Sta		II be \$750.0	ן טכ	<ol> <li>Election Campaign Fin Trust Fund Contribution</li> </ol>	~ ~	<b>\$5.0</b> Added	May Be to Fees
11.	OFFICERS AND DI		12.		ADDI	TIONS/CHANGES TO OFF	FICERS AND	DIRECTORS	3 IN 11
TITLE Name	PCD BORDEN, J. MICHAEL	☐ Delete	TITLE NAME					☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	2101 KENNEDY ROAD JANESVILLE WI		STREET ADDRES	SS					
TITLE NAME	VD	☐ Delete	TITLE NAME					Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	MICHALSKI, KENNETH J. 2101 KENNEDY ROAD JANESVILLE WI		STREET ADDRES	ss					
TITLE	STD	Delete Delete	TITLE	<del></del>		<del></del>	'	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	SCOTT, FRANK R. 2101 KENNEDY ROAD JANESVILLE WI		NAME STREET ADDRES CITY-ST-ZIP	ss					
TITLE NAME	VP	☐ Delete	TITLE NAME					☐ Change	Addition
STREET ADORESS CITY-ST-ZIP	MOONEY, JOHN B 1301 CENTRAL PARK DR-		STREET ADDRES	SS					
TITLE	SANFORD FL 32771-638	☐ Delete	CITY-ST-ZIP TITLE		,			☐ Change	Addition
NAME STREET ADDRESS			NAME STREET ADDRES	SS					
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	□ Delete	CITY-ST-ZIP TITLE					☐ Change	Addition
NAME		neicie	NAME	,,				onange	Addition
STREET ADDRESS CITY-ST-ZIP	l		STREET ADDRES				1		
indicated of the corp	certify that the information supplied with th on this report or supplemental report is tr poration or the receiver or trustee empow or on an attachment with an activess, with	ue and accurate and that my ered to execute this report as	signature sha	II have the s Chapter 607,	ame lega Florida	al effect as if made under Statutes; and that my nam	òath; that I an ie appears in	n an officer i	or director
SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #									