## **FILED** 2002 UNIFORM BUSINESS REPORT (UBR) May 23, 2002 8:00 am Secretary of State P37240 DOCUMENT # 1. Entity Name 05-23-2002 90118 050 \*\*\*150.00 CASTAWAYS, INC. Principal Place of Business Mailing Address 8164 VILLA DR 2310 NORTH ORANGE AVE. ORLANDO FL 32836 ORLANDO FL 32804 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 58-1702340 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MORELAND, CAREY L Street Address (P.O. Box Number is Not Acceptable) 202 LOOKOUT PLACE KEEWIN LEXINGTON PARK 4 MAITLAND FL 32751 City Zip Code 5. 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Addition Delete TITLE Change NAME NAME HERZOG, RICHARD B. STREET ADDRESS STREET ADDRESS 2310 NORTH ORANGE AVE. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32804 ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME SCHNEIDER, JEAN B. STREET ADDRESS STREET ADDRESS 2310 NORTH ORANGE AVE. CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32804 ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME SCHNEIDER, JEAN B. -STREET ADDRESS STREET ADDRESS 2310 NORTH ORANGE AVE. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32804 ☐ Change ☐ Addition Delete TITLE TITLE NAME HERZOG, RICHARD B. NAME STREET ADDRESS STREET ADDRESS 2310 NORTH ORANGE AVE. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32804 Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. Thereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other

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