FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED Apr 18, 2002 8:00 am Secretary of State 04-18-2002 90467 038 ***150.00

DOCUMENT # P 9300000 1535 1. Entity Name	
TERRY DANIEL BANK, INC.	

TERR	Y DANIEL BANK,]	inc.					
	DO NOT WRITE	IN THIS SPAC	CE				
2. Principal Place of Business 3. Mailing Address			-	B0068612			
2179 Suite, Apt.	SE Trillo Street	2179 SE Trillo Street Suite, Apt. #, etc.		_	DO NOT WRITE IN THIS SPACE		
City & State	LUCIE FLORIDA	City & State Port St. Lucie F	Ionda	4. F	El Number 65 0376646	Applied For Not Applicable	
3495	Country 5Z USA		intry S A	5. 0	Certificate of Status Desired	\$8.75 Additional Fee Required	
			Name C I	7. Na	me and Address of Current Re	gistered Agent	
	DO NOT WE)ITE	910	antz			
	<u> ئىلىنى ئىل</u>	شنب والتنويسة والمساجونة والمناب والمتاب المتنونة والمساجية	Street Addres	ss (P.O. B	ox Number is Not Acceptable)	<u></u>	
IN THIS SPACE			SIN	6th Street S	vite 200		
			CityPlan	ta t	10/1	FL Zip Code 33324	
8. The above	named entity submits this statement for th	ne purpose of changing its registe			ent, or both, in the State of Florida		
	•						
SIGNATURE .	Signature, typed or printed name of registered agent and	title if applicable. (NOTE: Registe	ered Agent signature req	uired when re	einstating)	DATE	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. January 1 - May 1 After May 1, Fee Amended UBI		e is \$550.00 R is \$61.25		Election Campaign Financ Trust Fund Contribution.	sing \$5.00 May Be Added to Fees		
11.	OFFICERS AND DI	Make Check Payable to	Department of	State			
TITLE	7	Ti	TLE				
NAME	BANKS, Terry D.	N/	AME Treet address				
STREET ADDRESS City-St-Zip	BANKS, Terry D. 2179 SE Trillo Street Pt. St. Lucie FL 3495	a ci	TY-ST-ZIP				
TITLE	11. 101. 100.00 Us	TI	TLE				
NAME			AME Treet address				
STREET ADDRESS CITY-ST-ZIP		.	TY-ST-ZIP				
TITLE	-		TLE				
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CITY-ST-ZIP			TY-ST-ZIP		DO NOT V	VKIIE	
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CITY-ST-ZIP		1	TY-ST-ZIP				
TITLE			TLE				
NAME		t e	AME FREET ADDRESS				
STREET ADDRESS			ITY-ST-ZIP				

13. I hereby certify that the information supplied with this filing 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 on an attachment with an address, with all other like empowered.

CER 954 444 6634 V 561 337-1172

3-20-03

SIGNATURE: X Terry D Bowles
SIGNATURE and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR