2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000035805



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

FTN MA	RKETING, INC.			03-03-2003 90459	040 ***150.00
Principal Place of Business 2340 STATE RD 580 SUITE B CLEARWATER FL 34623 US		Mailing Address 2340 STATE RD 580 SUITE B CLEARWATER FL 34623 US			### (###) ##### (#### ##### ###########
2. Principal Place of Business		3. Mailing Address			00
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES	
City & State		City & State		4. FEI Number 59-3188161 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Curro	ent Registered Agent		7. Name and Address of New Registere	
7562 AML		estate de la composition della	Street Address	JES HERRON JR s (PO. BOX AUTHORIJA (A) (A) (PO. BOX A) (PO. BOX A	>
LARGO F	L 33777		City () E	APMATED F	Zin Code
8. The above the obligation	named entity submits this statementions of registered agent.	nt for the purpose of changing its	registered office or regist	ered agent, or both, in the State of Florida. I ar	
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable. (NOTE	: Registered Agent signature requir	red when reinstating) DATE	
Afte	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.0		· · · · · · · · · · · · · · · · · · ·	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be
	Payable to Florida Department	. 1		inds() and Contribution.	☐ Added to Fees
10.	OFFICERS AI	ND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HERRON JR, JAMES M. 7562 ARALIA WAY LARGO FL 33777	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME Street address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
of the corp	ertify that the information supplied won this report or supplemental report or station or the receiver or trustee emor on an attachment with an address	indwered to execute this report as	he exemption stated in Se signature shall have the s required by Chapter 60	ection 119.07(3)(i), Florida Statutes. I further ce same legal effect as if made under oath; that I 7, Florida Statutes; and that my name appears	rtify that the information am an officer or director in Block 10 or Block 11 if

SIGNATURE: