2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2003
Secretary of State

DOCUMENT# P93000056369

Entity Name: MAYBEN ENTERPRISES, INC.

Current Principal Place of Business:

904 S STATE RD 19
PALATKA, FL 32177 US

New Principal Place of Business:

Current Mailing Address:

904 S STATE RD 19
PALATKA, FL 32177 US

New Mailing Address:

FEI Number: 59-3192315 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURRAY, RONALD A
708 N.W. 8TH AVE.
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MAYBEN, REBECCA A
Address: 6219 WEST BLVD.
City-St-Zip: MELROSE, FL 32666

Title: DST ( ) Delete
Name: MAYBEN, BARBARA S
Address: 568 W HILLSBUROUGH AVENUE
City-St-Zip: FLORAHOME, FL 32140

Title: D ( ) Delete
Name: MAYBEN, JR, THOMAS L
Address: 563 W HILLSBOROUGH AVENUE
City-St-Zip: FLORAHOME, FL 32140

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DST (X) Change ( ) Addition
Name: MAYBEN, BARBARA S
Address: 563 W HILLSBOROUGH AVE
City-St-Zip: FLORAHOME, FL 32140

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: N/A ( ) Change (X) Addition
Name: N/A, N/A
Address: N/A
City-St-Zip: N/A, NA N/A

Title: N/A ( ) Change (X) Addition
Name: N/A, N/A
Address: N/A
City-St-Zip: N/A, NA N/A

Title: D ( ) Change (X) Addition
Name: STEPHENS, JONATHAN J
Address: 6219 WEST BLVD.
City-St-Zip: MELROSE, FL 32666

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REBECCA MAYBEN PD 04/19/2003

Electronic Signature of Signing Officer or Director Date

JONATHAN J STEPHENS DIRECTOR
6219 WEST BLVD.
MELROSE,FL 32666

JONATHAN J STEPHENS DIRECTOR
6219 WEST BLVD.
MELROSE,FL.32666