

**FILED**  
**Jun 10, 2002 8:00 am**  
**Secretary of State**

05-21-2002 91150 001 \*\*\*150.00

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

DOCUMENT # **P93 000080811**  
1. Entity Name  
**Royal House of Stuart Inc.**

**FEI # IS**  
**59-320 8577**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**2300 Boggy Creek Rd.**  
3. Mailing Address  
**2300 Boggy Creek Rd.**

City & State  
**Kissimmee FL**  
City & State  
**Kissimmee FL**  
Zip  
**34744** Country  
**USA** Zip  
**34744** Country  
**USA**

4. FEI Number  
**P93000080811** Applied For  
Not Applicable  
5. Certificate of Status Desired  **\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent  
**Phyllis Ann Bennett**  
Street Address (P.O. Box Number is Not Acceptable)  
**2300 Boggy Creek Rd.**  
City  
**Kissimmee FL** Zip  
**34744**

8. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature of agent or person named in registered office and state if applicable. (Do Not Register Agent signature required when not required)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.   
10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fee

11. OFFICERS AND DIRECTORS			
TITLE <b>President</b>	NAME <b>Phyllis Ann Bennett</b>	TITLE	NAME
STREET ADDRESS <b>2520 Fortune Rd.</b>	CITY-STATE-ZIP <b>Kissimmee FL 34744</b>	STREET ADDRESS	CITY-STATE-ZIP
TITLE <b>V.P.</b>	NAME <b>William Hurt</b>	TITLE	NAME
STREET ADDRESS <b>2820 Fortune Rd</b>	CITY-STATE-ZIP <b>Kissimmee FL 34744</b>	STREET ADDRESS	CITY-STATE-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-STATE-ZIP	STREET ADDRESS	CITY-STATE-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-STATE-ZIP	STREET ADDRESS	CITY-STATE-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-STATE-ZIP	STREET ADDRESS	CITY-STATE-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 an attachment with an address, with all other like empowered.  
**Phyllis Ann Bennett** **PHYLLIS ANN BENNETT** **4/30/02** **407-344-9385**

C12E0848 (12/01)