2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91519 018 ***150.00

10090180

DOCUMENT # P94000021562

1. Entity Name
MICHAEL R. PRESLEY, CHARTERED

Principal Place of Business	Mailing Address
5370 NW 35TH TERRACE BLDG B SUITE 111 FORT LAUDERDALE, FL 33309	5370 NW 35TH TERRACE BLDG B SUITE 111 FORT LAUDERDALE, FL 33309

2. Principal Place of Business		3. Mailing Address	
701 North Point Pkway		701 North Point Pkway	
Suite, Apt. #, etc.: Suite 220		Suite, Apt. #, etc.: Suite 220	
City & State: West Palm Beach, FL.		City & State: West Palm Beach, FL.	
Zip: 33407	Country: USA	Zip: 33407	Country: USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0475770 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PRESLEY, MICHAEL R ESQ 5370 NW 35TH TERRACE BLDG B SUITE 111 FORT LAUDERDALE, FL 33309	Name: Presley, Michael R ESQ. Street Address (P.O. Box Number is Not Acceptable): 701 North Point Pkway Suite 220 City: West Palm Beach, FL Zip Code: 33407

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] / Michael R. Presley, ESQ. 4/25/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST PRESLEY, MICHAEL R 2455 E. SUNRISE BLVD., STE 320 FORT LAUDERDALE, FL 33304	☐ Delete	PST Michael R. Presley, ESQ. 701 North Point Pkway, Suite 220 West Palm Beach, FL. 33407	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] / Michael R. Presley, ESQ. 4-25-03 561-689-7300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #