2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 18, 2000 8:00 am
Secretary of State
01-18-2000 90190 044 ***150.00

DOCUMENT # P94000039627

1. Entity Name
CHANGE MANAGEMENT ASSOCIATES, INC.

Principal Place of Business	Mailing Address
970 PELICAN LN ROCKLEDGE FL 32955	PO BOX 560541 ROCKLEDGE FL 32956-0541 US

900707

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4307 Woodhall Circle	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Viera, FL	City & State
Zip: 32955 Country: USA	Zip Country

4. FEI Number 59-3243392 ☐ 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
PETERS, JOHN J 970 PELICAN LN ROCKLEDGE FL 32955	Name: Peters, John J Street Address (P.O. Box Number is Not Acceptable): 4307 Woodhall Circle City: Viera FL Zip Code: 32955

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 [signature] John J. Peters, CEO/President 1/8/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPT JOHN J. PETERS 970 PELICAN LANE ROCKLEDGE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPT John J. Peters 4307 Woodhall Circle Viera, FL 32955	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS PETERS, BONNIE J 970 PELICAN LN ROCKLEDGE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS Bonnie Jo Peters 4307 Woodhall Circle Viera, FL 32955	☒ 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
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CR2E034 (9/99)

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

SIGNATURE: [signature] John J. Peters, CEO/President 1/8/00 321-632-1174
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #