**FILED** 

May 02, 2003 8:00 am Secretary of State

05-02-2003 90370 002 \*\*\*150.00

## 8

## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT #**

P95000003376

1. Entity Name

E.R. FUNDS, INC.

	·				1						
Principal Place of Business 6080 TERRA ROSA CIRCLE BOYNTON BEACH FL 33437 33			Mailing Address 6080 TERRA ROSA CIRCLE BOYNTON BEACH FL 33437 33				A RECORDER HAT LETTE THAT COME THE TERM COME TO	<b>sa</b> an <b>an</b> dana ƙ	MAR BUM ICON		
2. Principal Place of Business			3. Mailing Address				-				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State				4. F	FEI Number 65-0567132 Applied in Not Appl		plied For t Applicable	
Zíp	Country		Zip	Zip Cour					8.75 Add	75 Additional Required	
6. Name and Address of Current I				Registered Agent			7. Name and Address of New Registered Agent				
				• •	1	Vame	A COMMAND OF THE PERSON OF THE				
WILLIAMS, EDWARD S					-	Street Address (P.O. Box Number is Not Acceptable)					
6080 TERRA ROSA CIRCLE					L`	Shoot read see (1.5. Box rams of 10 the september)					
BOYNTON BEACH FL 33437											
									Zip Code	<del></del> -	
9. The above appeal antity substitution statement for the automore of chancing its con-						<i>(</i> ()			-10:		
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 Fiorida. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE									<del></del>		
	<del></del>			<del></del>					<del></del>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00								9. Election Campaign Financing \$5.00 Ma			
Make Check Payable to Florida Department of				1			Trust Fund Contribution.		to Fees		
10.	0. OFFICERS AND DIRE			RECTORS 11.			ADO	DITIONS/CHANGES TO OFFICERS AND D	PIRECTORS	S IN 11	
TITLE	D			☐ Delete	TITLE				Change	Addition	
NAME		EDWARD \$			NAME						
STREET ADDRESS		RA ROSA CIRCLE			STREET AT	1				. }	
CITY-ST-ZIP		BEACH FL 33437		<del></del>	CITY-ST-	<sup>∠(P</sup>					
TITLE	D	CANDDAL		Delete	TITLE	1		l	Change	Addition	
NAME STREET ADDRESS		, SANDRA L BA ROSA CIRCLE			name Street al	nnaege					
STREET ADDRESS 6080 TERRA ROSA CIRCLE CITY-ST-ZIP BOYNTON BEACH FL 33437					CITY-ST-	l l					
	35.11.511	00101112 00101		Delete -	TITLE				Change	Addition	
NAME		<u>p.—x</u> ()	-1.	Deidle	NAME	\ .			_) Shango	C) / ISSUITOR	
STREET ADDRESS				j	STREET AL	ODRESS		•			
CITY-ST-ZIP	1				CITY-ST-	ZIP					

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 of 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.

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

10 C SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

☐ Delete

☐ Change

☐ Change

Change

☐ Addition

☐ Addition

☐ Addition