2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P95000019734 **DOCUMENT #**



FILED Mar 19, 2003 8:00 am Secretary of State

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITIEE D BATEMAN, RONALD 553 WINDING CREEK PLACE LONGWOOD FL 32779 ITIEE UNME UNME UNME UNME UNME UNME UNME UN	STANSF	IELD & ASSOCIATES, INC.					03-19-2003 9	90090	001 ***15	58.75
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S. Certificate of Status Desired			City & State		4.	1993313834				
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Street-Address (R-O-Box Number is Not Acceptable) Street-Address (R-O-Box Number is Not Acceptable)	RATEMAI	N RONALD			Name					
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 access the obligations of registered agent, or both, in the State of Florida. I am familiar with, and access signature of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and access signature of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and access signature of the state of Florida part and title if applicable. FILE NOW!!! FEE IS \$150.00	553 WINDING CREEK PLACE				Street: Address (P.O. Box Number is Not Acceptable)					
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accel the obligations of registered agent. Common	LONGWO	OOD FL 32779			City				- 1 2	
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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 instee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in changed, or on an attachment with an address, with all other the empowered.

SIGNATURE: