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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1996

P95000020821 (1)

UNITED BRETHREN BUSINESS DEVELOPMENT CORPORATION . INC.

Mailing Address Principal Place of Business POST OFFICE BOX 617496 POST OFFICE BOX 617496 ORLANDO FL 32861-7496 ORLANDO FL 32861-7496 3. Date Incorporated or Qualified 3a. Date of Last Report 03/13/1995 4. FEI Number Applied For 2. Principal Place of Business 2a, Mailing Address 59-337 2494 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s. 199.032, Country Z_{10} Country $Z_{\rm IP}$ Yes No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Jeff Robinson Street Address (P.O. Box Number is Not Acceptable) 4978 01d Winter Garden Road MAXWELL, FRED L 82 2035 WEST CENTRAL BOULEVARD 83 ORLANDO FL 32805 85 32811 84 Or lando 7, 0502 and 607, 1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I amount, Section 607, 0505, Florida Statutes the provisions of Section 11. Pursuant to ent, or both, in the or registe 4-19-1996 SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 RS AND DIRECTORS 13. 12. Addit on DELETE 1. 1 TITLE TITLE D 1.2 NAME ROBINSON, JEFF 4978 Old Winter Garden Road MAXWELL, FRED L NAME 2035 WEST CENTRAL BOULEVARD 1.3 STREET ADDRESS STREET ADDRESS Orlando, Florida 32811 1.4 CHY-ST-ZIF ORLANDO FL 32805 CITY-ST-ZIP Change Addition DELETE 2 1 TiTLE TITLE 2.2 NAME Evans, Robert NAME 8631 Knottingham Drive Kissimmee, Florida 34747 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY-ST-ZIP Add tion DELETE Change 3 171516 TITLE Ð 3.2 NAME NAME Wilson, Dean 3.3 STREET ADDRESS 4323 Prince Hall Blvd. STREET ADDRESS 34 CITY - ST - ZIP Orlando, Florida 32811 CHTY - ST - ZIP Addition Change [] DELETE 4.1 Blue TITL€ D 4.2 NAME NAME Simmons, Lewis 4.3 STREET ADDRESS STREET ADDRESS 2052 Belafonte Lane 4.4.011Y 51-71P CITY - ST - ZIP Orlando, Florida 32811 ☐ Change Addition DELETE 5 1 T-TCE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST-7IP CITY - ST - ZIP ☐ Change Add:tion DELETE 6 1 THLE TITLE 6.2 NAME 6.3 STRUST ADDRESS STREET ADDRESS 64 CITY - ST - Z-P CITY - ST - ZiP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or disciplination or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Block 14 or Block 13 or Block 14 o

(Secretary) SIGNATURE AND TYPED OF PRINTED N SIGNATURE: D

an attachment with an address

appears in Block 12 or Blo

4-19-1996 407 843 1477

(12/95)R2E034