2002 Uniform Business Report (UBR)

DOČŮMENT # P9500052258 1. Entity Name LCA DEVELOPMENT, INC.						AND FILED 02 MAR 28 PM 12: 52			
Principal Place of Business 800 N. HIGHLAND AVENUE, STE. 200 ORLANDO FL 32803 Mailing Address PO BOX 4961 ORLANDO FL 32801-4961 US						SECRETARY OF STATE TALLAHASSEE, FLORIDA	# 81418 11848 11 8 4		
2. Principal I	Place of Business	3. Mailing Address							
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			1	DO NOT WRITE IN THIS SPACE			
City & Sta	te	City & State			4. FEI Number 59-3325529 Applied For				
Zip Country		Zip Cour		itry	5. (Certificate of Status Desired	\$8.75 Ad		
	6. Name and Address of Current	Registered Agent			7. N	Name and Address of New Registered		,u	
B&C CORPORATE SERVICES OF CENTRAL FL.,INC. 390 N. ORANGE AVENUE SUITE 1100				Name Street Address	Address (P.O. Box Number is Not Acceptable)				
ORLANDO FL 32801				City		FI	Zip Cod	le -	
8. The above	e named entity submits this statement for	the purpose of changing its	registere	ed office or registe	ered ag	ent, or both, in the State of Florida.			
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	: Registere	d Agent signature require	d when re	instating) DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After May 1, 2002 Make Check Payable				will be \$550.00	ate	Election Campaign Financing Trust Fund Contribution.		0 May Be d to Fees	
11.	OFFICERS AND	DIRECTORS	12.		ADI	DITIONS/CHANGES TO OFFICERS AN	D DIRECTOR:	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS CARLTON, CHARLES 800 N. HIGHLAND AVENUE, STE ORLANDO FL 32803	□ Delete 200	11				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT KROPP, STEVEN G 800 N. HIGHLAND AVENUE, STE ORLANDO FL 32803	□ Defete 200	11	I			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS MCKINNEY, EUGENE J 800 N. HIGHLAND AVENUE, STE ORLANDO FL 32803	□ Delete 200	II .			600005181 -04/02/020 ****150.00	10170 ****15	0.80	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	III .	i			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	11	I			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY-	T ADDRESS ST-ZIP			☐ Change	Addition	
i inereby c	ertify that the information supplied with t	is illing does not qualify for t	ne exen	nption stated in Se	ction 1	19.07(3)(i), Florida Statutes. I further cer	tify that the in	formation	

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 of 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:

Steven G. Kropp, Vice President 3 25-62

CR2E034 (9/01)