

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000091966

FILED
Jan 10, 2002 8:00 AM
Secretary of State

Entity Name: TRICK SHOTS TWO, INC.

Current Principal Place of Business:

2781 W. STATE ROAD 434
LONGWOOD, FL 32779

New Principal Place of Business:

2781 W. STATE ROAD 434
LONGWOOD, FL 327794880

Current Mailing Address:

2781 W. STATE ROAD 434
LONGWOOD, FL 32779

New Mailing Address:

2781 W. STATE ROAD 434
LONGWOOD, FL 327794880

FEI Number: 59-3345325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, LANCE D
2781 W. STATE ROAD 434
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

SMITH, LANCE D
2781 W. STATE ROAD 434
LONGWOOD, FL 327794880 US

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:

01/10/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: DANIELS, JAMISON R.
Address: 545 FOX HUNT CIRCLE
City-St-Zip: LONGWOOD, FL 32750

Title: PSTD () Delete
Name: SMITH, LANCE D
Address: 2781 W. STATE ROAD 434
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PSTD (X) Change () Addition
Name: SMITH, LANCE D
Address: 2781 W. STATE ROAD 434
City-St-Zip: LONGWOOD, FL 327794880

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LANCE D. SMITH

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01/10/2002

Electronic Signature of Signing Officer or Director

Date