## FILED

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

Apr 14, 2003 8:00 am \$ Secretary of State P96000074511 **DOCUMENT #** 1. Entity Name 04-14-2003 90415 033 \*\*\*150.00 TARCORRA ENTERPRISES, INC. Principal Place of Business Mailing Address 14606 SW 70TH ST. 14606 SW 70TH ST. ARCHER FL 32618 ARCHER FL 32618 US US 2. Principal Place of Business 3. Mailing Address AUCNO 3003 Sours ATLANTIC 3003 LOUTH ATLAUTIC Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES 16A1 1 A d1 City & State City & State 4. FEI Number Applied For 59-3403712 DAYZONA BRACH SYOZON Not Applicable DAYTONA Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 32118 32118 みしし Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MILLER, FRANK E Street Address (P.O. Box Number is Not Acceptable) 200 W FORSYTH ST, SUITE 1400 JACKSONVILLE FL 32202 City Zip Code 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 accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ☐ Addition TITLE TITLE Change : ☐ Delete NAME CORR, KEVIN J NAME ATLANTIC ANONUE 16A1 STREET ADDRESS 14606 SW 70TH ST. STREET ADDRESS ARCHER FL CITY-ST-ZIP CITY-ST-7IP BEACH SHORE Delete ☐ Change ☐ Addition TITLE TITLE CORR, JEAN A NAME NAME STREET ADDRESS STREET ADDRESS 1952 CLATTER BRIDGE ROAD CITY-ST-7IP CITY-ST-ZIP OCALA FL TITLE S ☐ Detete TITLE ☐ Change ☐ Addition NAME ~ CORR. JEAN A NAME STREET ADDRESS 1952 CLATTER BRIDGE ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OCALA FL ☐ Addition Change ☐ Delete TITLE

12. I hereby certify that the information supplied This filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of t 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supplemental reof the corporation or the receiver or trust changed, or on an attachment with as

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