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## FILED Jul 30, 2002 8:00 am Secretary of State

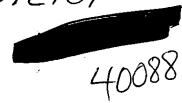
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## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P960009 2707 1. Entity Name WILLOW TREE CENTER, INC. DO NOT WRITE IN THIS SPACE 40088 3. Mailing Address
SAME 2. Principal Place of Business 1003 WILLOW POND DR DO NOT WRITE IN THIS SPACE Suite, Apt. 4, etc Applied For City & State 4. FEI Number City & State <u> 20-3419190</u> Not Applicable SAFETY HARBOR FL \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE IN THIS SPACE 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. SIGNATURE Stynation, would or present mone of registerior agent and this if upostorate. (NeDTE: Registered Agost signature required when relevanting) January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, Fee Is \$550.00 Tax filling requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. CR2E034B (12/01) LINNER, MARCELLA 3 1003 WILLOW POND DR. 16116 NA: AE STREET ADDRESS STREET ADDRESS SAFETY HARBOR FL. 34695 CITY-ST-ZIP CN14-21-5tb THLE 1241.45 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CRY-SI-7P nns THE MAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-2F CHY-SI-ZIP IN THIS SPACE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CON-ST-78 CITY-ST-DP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-Z# RUE mue NAME MANG SIREET ADDRESS STREET AUDIALSS OTY-ST-ZIP CITY-ST-7IP 13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the information 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 truston empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empewered. 6.26.02

Attachment # 196000092707





June 26, 2002

Division of Corporations Uniform Business Report P.O. Box 1500 Tallahassee, Fl. 32302

Dear Sirs:

We did not receive a preprinted UBR report packet from you.

My husband works for the armed services, and we have been out of town a lot.

We have downloaded a blank report from your site and completed it.

Please file our enclosed report..

Enclosed is \$150.00 to pay for the 2002 Uniform Business Report Fee.

Thank you

Marcella Zinner

President