2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P96000102604 May 17, 2000 8:00 am Secretary of State FEAR FIGHTERS ASSOCIATION OF AMERICA, INC. 05-17-2000 90941 037 ***150.00 Principal Place of Business Mailing Address 205 BASE AVENUE 205 BASE AVENUE VENICE FL 34285-3927 VENICE FL 34285 U000---2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0845546 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BURNHAM, DONALD R Street Address (P.O. Box Number is Not Acceptable) 1532 US 41 BY-PASS SO. **SUITE 241** VENICE FL 34293 Zip Code City FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. P/D ☐ Change ■ Addition TITLE ☐ Delete BURNHAM, DONALD R NAME STREET ADDRESS .1532 U.S. 41 BY-PASS, SUITE 241 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VENICE FL 34293 ☐ Delete Secretory TITLE TITLE BURNHAM, ALICE NAME NAME 451 MORNINGSIDE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VENICE FL 34293 CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE KOLINSKI, BONNIE D NAME NAME 205 BASE AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VENICE FL 34285 ☐ Addition ☐ Change ☐ Delete TITHE TITLE HANOH, STEPHEN NAME NAME 205 BASE AVENUE STREET ADDRESS STREET ADDRESS VENICE FL 34285 CITY-ST-7iP CITY-ST-ZIF ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Addition Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE 13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Date Daytime Phone #