2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000024491

1. Entity Name

MAGNOLIA HOUSE OF GRAYTON BEACH, INC.



FILED Mar 10, 2003 8:00 am Secretary of State

03-10-2003 90749 035 ***150.00

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Principal Plac	ce of Business	" THE SUPPLET	Mailir	na Address								
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Principal Place of Business 3. Mailing Address						_			OCH OPHI FOR	I ILENI BABIN BABIN		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				_	-	1 10		
	,						☐ CHECK HERE IF MAKING CHANGES					
City & Stat	`a	City	City & State				4. FEI Number FO 044040			oplied For		
Oity & Oldi		J 011,	Oily a diale				4. FEI Number 59-3446436	ŝ		ot Applicable		
Zip	Country				Cour	itry						
ĽÞ					iti y	1	5. Certificate of Status Desired		\$8.75 Add			
6. Name and Address of Current Registere				ed Agent :	gent : 2			7. Name and Address of New Registered Agent				
	O. Ivalilo ai	id Address of Od	Trem Megiater	ad Agent		Name		7. Name and Address of New	negisierea	Agent		
VELDMAN, RICHARD												
				Street Address			ss (P.C	(P.O. Box Number is Not Acceptable)				
2 MAGNOLIA ST												
SANTA R	osa beach f	L 32459				ļ						
						City				Zip Cod		
						City			Fl	■ Zip Cod	В	
8. The above	named entity st	ubmits this statem	ent for the purp	ose of changing it	s registere	ed office or regi	stered	agent, or both, in the State of F	lorida. 1 am	familiar with,	and accept	
the obligat	tions of registere		, ,	• •		ū					.	
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SIGNATURE .	Signature, hand or o	rinted name of registered	t agent and title it and	diashle (NO	TC: Dopietoro	d Agent signature reg	izadb.	an animatation.	DATE			
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∵ F	ILE NOW!!!	FEE IS \$150.00)					9. Election Campaign F	inonoino	ĈE O		
		Fee will be \$55						Trust Fund Contributi			May Be	
Make Check	c Payable to F	lorida Departme	ent of State					Track y and continuent	J (10100	
10.		OFFICERS	AND DIRECTO	ECTORS 11.				ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTOR	S IN 11	
TITLE	D			☐ Delete	TITLE					☐ Change	☐ Addition	
NAME	VELDMAN, R	ICHARD			NAM	E						
STREET ADDRESS	1401 BAYTO				STRE	ET ADDRESS						
CITY-ST-ZIP	DESTIN FL 3	2541			CITY	-ST-ZIP						
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MULLIMANE PRANCY VELDMAN SIGNATURE: NONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.03.03

850.231.5859

Daytime Phone

CR2E034 (10/02