

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90052 021 ***150.00

DOCUMENT # P97000027345

1. Entity Name
CHANGES IN ATTITUDE CHARTERS, INC.

Principal Place of Business 101-A PATRICIA LANE MARATHON FL 33050 US	Mailing Address 101-A PATRICIA LANE MARATHON FL 33050 US
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2. Principal Place of Business 119 CALLE ENSUENO Suite, Apt. #, etc.	3. Mailing Address 119 CALLE ENSUENO Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State MARATHON, FL	City & State MARATHON, FL	4. FEI Number 65-0752686	Applied For <input type="checkbox"/> Not Applicable
Zip 33050	Country US	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FERRARO, BRUCE J 101-A PATRICIA LANE MARATHON FL 33050	7. Name and Address of New Registered Agent Name BRUCE J. FERRARO Street Address (P.O. Box Number is Not Acceptable) 119 CALLE ENSUENO City MARATHON FL Zip Code 33050
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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 *Bruce J. Ferraro* - **BRUCE J. FERRARO** DATE **1/26/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FERRARO, BRUCE J 101-A PATRICIA LANE MARATHON FL 33050	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRUCE J. FERRARO 119 CALLE ENSUENO MARATHON, FL 33050
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FERRARO, LILIANA H 101-A PATRICIA LANE MARATHON FL 33050	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LILIANA H. FERRARO 119 CALLE ENSUENO MARATHON, FL 33050
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

SIGNATURE: *Bruce J. Ferraro* DATE **1/26/01** (305)743-2424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

UBR01

CR2E034 (10/00)