2003 FOR PROFIT CORPORATION

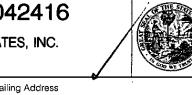
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P97000042416

1. Entity Name

PICERNE ANACUITAS MANOR ASSOCIATES INC



FILED Apr 21, 2003 8:00 am Secretary of State

04-21-2003 90381 018 ***150.00

I IOLI II VL	ANACOTTAC MANCOT ACC	OOMIL											
Principal Place of Business 247 NORTH WESTMONTE DRIVE ALTAMONTE SPRINGS FL 32714		Mailing Address 247 NORTH WESTMONTE DRIVE ALTAMONTE SPRINGS FL 32714											
2. Principal P	Place of Business	3. Mailing Address									BHF BEBBI	11 310 0111 1801	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES						
City & Stat	е	City & State			4. F			FEI Number 59-3446824	1		\rightarrow	pplied For ot Applicable	7
Zip Country			Zip Coun				5. C	Dertificate of Status Desired			75 Add		1
	6. Name and Address of Current	Register	Registered Agent				7. N	Name and Address of New	Registere	ed Agen	t].
					Name								7
), w. terry e esq ie street					Street Address (P.O. Box Number is Not Acceptable)							
STE 1400													1
) FL 32801								F	:L ^z	Zip Code	e	1
	named entity submits this statement for ions of registered agent.	or the purp	oose of changing its re	egistere	ed office or	registere	d age	ent, or both, in the State of F	orida. La	ım familia	ar with,	and accept	1
SIGNATURE .	,												
	Signature, typed or printed name of registered agent	and title if app	olicable. (NOTE: 8	Registered	d Agent signatu	ire required w	vhen rei	instating)	DAT	E			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign F Trust Fund Contributi	-			0 May Be I to Fees	
10.	OFFICERS AND		L PRS	11.	•		ADI	L DITIONS/CHANGES TO OF	FICERS A	ND DIRI	ECTOR!	3 IN 11	\dashv
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NAME	PICERNE, ROBERT M		NAME		:								101
STREET ADDRESS	247 N WESTMONTE DR	_			REET ADDRESS								Š
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32714	}			CITY-ST-ZIP								100
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STREET ADDRESS	WALKER, DWAYNE 247 N WESTMONTE DR				- Et address								
CITY-ST-ZIP					-ST-ZIP								
TITLE	VPS		☐ Delete	TITLE							Change	Addition	
NAME	ERICH, JACK W			NAM									
STREET ADDRESS	247 N WESTMONTE DR				ET ADDRESS								
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32714	<u> </u>		! —	·ST-ZIP			'		, p			4
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12. I hereby certify that the information supplied with this filling 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:

4077720200