

Amended

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06-14-2001 90010 032 ****61.25

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 JUN 28 AM 10:52

PROFIT CORPORATION ANNUAL REPORT 2001		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 97000043467
1. Corporation Name
Strollin' USA, Inc.

Principal Place of Business
4925 38th Way S
#106
St Pete FL 33711

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 5/12/97

2. Principal Place of Business

21 4925 38th Way S

2a. Mailing Address

22 Suite, Apt. #, etc.
#106

23 City & State
St Pete, FL

24 Zip 33711

27 City & State

28

29 Zip

Country

4. FEI Number 59-3448101

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Shirley L Exelby
4925 38th Way S #106
St Pete, FL 33711

81 Name

82 Street

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST
NAME Shirley L Exelby
STREET ADDRESS 4925 38th Way S #106
CITY-ST-ZIP St Pete, FL 33713

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STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP
1.2 NAME John A Bodenchak
1.3 STREET ADDRESS 4925 38th Way S #106
1.4 CITY-ST-ZIP St Pete, FL 33713

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John A Bodenchak

06/06/01

Date

Daytime Phone #