2002 UNIFORM BUSINESS REPORT (UBR)

Apr 18, 2002 8:00 am Secretary of State P97000044584 DOCUMENT # 1. Entity Name DELAND FOREVER GREENS, INC. 04-18-2002 90391 034 ***150 00 Mailing Address Principal Place of Business 5382 ARAGON AVE. 5382 ARAGON AVE. **DELEON SPRINGS FL 32130 DELEON SPRINGS FL 32130** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3453068 Not Applicable Zip 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 BRITTINGHAM, RALPH W Street Address (P.O. Box Number is Not Acceptable) 5382 ARAGON AVE. **DELEON SPRINGS FL 32130** Zip Code 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. 18. March SIGNATURE Signature, typed or printed name of registered agent and title if applicable. · (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing Tax.filing requirement and elects to do so. After May 1, 2002 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. ☐ Change ☐ Addition TITLE ☐ Delete TITLE BRITTINGHAM, RALPH W NAME 5382 ARAGON AVE. STREET ADDRESS STREET ADDRESS **DELEON SPRINGS FL 32130** CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE BRITTINGHAM, KRISTY NAME STREET ADDRESS 5382 ARAGON AVE. STREET ADDRESS **DELEON SPRINGS FL 32130** CITY-ST-ZIP CITY-ST-ZIE TITLE ☐ Delete ☐ Change Addition CLIFFORD, HIRES NAME 461 SHAW LAKE RD STREET ADDRESS STREET ADDRESS PIERSON FL 32180 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE SANDERS, DAWN NAME NAME 315 W PENNSYLVANIA #1 STREET ADDRESS STREET ADDRESS DELAND FL 32720 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

FILED

CR2E034 (9/01)