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Jun 16, 2003 8:00 am
Secretary of State
04-30-2003 90149 043 ***150.00

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~~2003 FOR PROFIT CORPORATION~~ UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # ~~P97000060787~~

55048414

1. Entity Name
SOJOURN DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
P.O. BOX 1442 AUBURNDALE, FL 33823	P.O. BOX 1442 AUBURNDALE, FL 33823

[redacted]

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
PO Box 7603	PO Box 7603
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: WINTER HAVEN, FL	City & State: WINTER HAVEN FL
Zip: 33880 Country: FOLK	Zip: 33880 Country: FOLK

4. FEI Number: 65-0778699 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SAFER, ELIOT J 10110 SAN JOSE BLVD JACKSONVILLE, FL 32257	Name: BREEZI STANISLAUS Street Address (P.O. Box Number is Not Acceptable) 4664 TOWER PINE RD City: ORLANDO FL Zip Code: 32839

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Breezi K. Stanislaus DATE: 4/4/03

(Signature, typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent's signature required when reinstating)

DUE NOW!!! FEE IS $150.00
After May 1, 2003 FEE will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TINSLEY, SERETHA S 2705 COUNTRY CLUB RD. N. WINTER HAVEN, FL 33881	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~STANISLAUS, MARCELA E~~ ~~120 LOMA BONITA DR.~~ ~~DAVENPORT, FL 33837~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition PRESIDENT STANISLAUS MARCELA 364 PASCO COURT WINTER HAVEN, FL 33884
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☑ Addition D BREEZI STANISLAUS 4664 TOWER PINE RD ORLANDO, FL 32839
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

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: Marcela Stanislaus 4/25/03 863 412-3040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #