1. Entity Nam	MENT # P98000 0 AISE SHOP INC.	03151	t,		09-	07, 2001 8 cretary of o7-2001 90002 001 07-2001 90002 002	***150.00	0
Principal Place of Business 714 N MAIN STREET CHIEFLAND FL 32644 2. Principal Place of Business		Mailing Address P.O. BOX 1280 CHIEFLAND FL 32644 3. Mailing Address						
City & State		City & State			4. FEI Number	59-3484159		oplied For ot Applicable
Zip	Country	Zip	Count	ry	.5. Certificate of St	atus Desired	\$8.75 Add	ditional
	6. Name and Address of Current F	Registered Agent		Name	7. Name and Add	ress of New Registered		
POLLOCK, MARCIA W			ļ		(D.O. Bay Number in I	Not Appostable)		
	N MAIN STREET FLAND FL 32644	~		= origer Youress	(P.O. Box Number is	voi Acceptable)		
, Offic	ENID I E GEOTT		Ì	City			Zip Cod	
						FL		
8. The above	named entity submits this statement for	the purpose of changing its	registere	d affice or registe	red agent, or both, in	the State of Florida.		
SIGNATURE _	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOT	E: Registered	Agent signature require	d when reinstating)	DATE		
9. This corpo	pration is eligible to satisfy its Intangible	FILE NOW				O		
Tax filing r	requirement and elects to do so.	After MAY 1, 20 Make Check Payal	01 Fee	will be \$550.00	1 Trust Fu	Campaign Financing and Contribution.	\$5.0 Added	0 May Be d to Fees
11.	OFFICERS AND D		12.	partition of other		NGES TO OFFICERS AND	DIRECTOR	S IN 11
TITLE Name	P POLLOCK, MARCIA W	☐ Delete	TITLE	ſ			☐ Change	Addition
STREET ADDRESS	107 SE 4 STREET		STREE	T ADDRESS				
CITY-ST-ZIP	CHIEFLAND FL 32644 V	Delete	CITY-	ST-ZIP			☐ Change	
Name Street address	WESTBURY, ELVIRA W 519 NE 2 STREET	□ Delete	NAME STREE	T ADDRESS			L_ onlings	
CITY-ST-ZIP	CHIEFLAND FL 32644	☐ Delete	CITY	ST-ZIP			Change	Addition
NAME	•	La Delete	NAME	: }			_ onsingo	
STREET ADDRESS CITY-ST-ZIP		,		ST-ZIP				
TITLE		☐ Delete	TITLE	J	<u>-</u> ,- _ ,-		☐ Change	☐ Addition
name / Street address City-ST-Zip		•	No.	ET ADORESS ST-ZIP				
TITLE		☐ Delete	TITLE	ſ			☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				T ADORESS ST-ZIP				
TITLE NAME STREET ADDRESS		☐ Delete		T ADDRESS			☐ Change	☐ Addition
indicated of the con	certify that the information supplied with to the thing report or supplemental report is poration or the receiver or trustee empore or on an attachment with an address, we	true and accurate and that report	r the exer	ure shall have the	same legal effect as i	f made under oath; that I a	ım an officer	r or director
- 3 .								

18000003157

THE PRAISE SHOP INC.
P O BOX 1280
CHIEFLAND, FL 32544

DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILINGS P O BOX 1500 TALLAHASSEE, FL 32302-15

RE: DOCUMENT #P98000003151 FEI NUMBER 59-3484159

GENTLEMEN:

ENCLOSED HEREWITH IS OUR CHECK FOR \$150.00 FOR OUR 2001 UNIFORM BUSINESS REPORT THAT WAS DUE ON MAY 1, 2001.

I REALIZE THAT THIS IS BEING FILED LATE BUT ASK YOU TO WAIVE LATE FEE FOR THE FOLLOWING REASONS. I JUST FOUND THIS REPORT FILED WITH MY FEDERAL TAX RECORDS. IT HAD NEVER BEEN OPENED AND I DID NOT REALIZE THAT IT WAS DUE. I AM 77 YEARS OLD AND FIND THAT I DON'T REMEMBER AS WELL AS I ONCE DID.

THIS IS THE FIRST TIME WE HAVE EVER BEEN LATE FILING THIS RETURN. YOUR CONSIDERATION OF A WAIVER WOULD BE GREATLY APPRECIATED. WE ARE A SMALL BUSINESS AND THE EXTRA TAX WOULD BE A REAL HARDSHIP ON US.

THANKING YOU IN ADVANCE.

Ruia W. Mustlin

SINCERELY,

ELVIRA WESTBURY VICE PRESIDENT