

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000020362

FILED
Jan 06, 2004
Secretary of State

Entity Name: U.C.R. DELAND, INC.

Current Principal Place of Business:

925 N SPRING GARDEN AVE
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

925 N SPRING GARDEN AVE
DELAND, FL 32720

New Mailing Address:

FEI Number: 59-3498252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALLINGER, STEVEN R
412 SE 18TH ST
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

BALLINGER, STEVEN R
888 SO. ANDREWS AVENUE
SUITE 205
FORT LAUDERDALE, FL 33316 US

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.

SIGNATURE:

01/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ADAMS, LAURI
Address: 925 N SPRING GARDEN AVE
City-St-Zip: DELAND, FL 32720

Title: VD () Delete
Name: GILDERMAN, LARRY D.O.
Address: 925 N SPRING GARDEN AVE
City-St-Zip: DELAND, FL 32720

Title: TSD (X) Delete
Name: GILDERMAN, BRIAN
Address: 925 N SPRING GARDEN AVE
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: GILDERMAN, BRIAN D.O.
Address: 925 N SPRING GARDEN AVE
City-St-Zip: DELAND, FL 32720

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURI ADAMS

PD

01/06/2004

Electronic Signature of Signing Officer or Director

Date