2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR P98000038154 **DOCUMENT #** 1. Entity Name CASCADE REALTY INC.

FILED Aug 18, 2003 8:00 am Secretary of State

08-18-2003 90166 001 ***150.00

	: HEALT, 1140.				
Principal Place of Business 2439 BEE RIDGE ROAD SARASOTA FL 34239		Mailing Address 2439 BEE RIDGE ROAD SARASOTA FL 34239		1 (4 A) 1 A)	65 (116) 1818((186) 81(() 816) (46)
2. Principal Place of Business		3. Mailing Address		i indiindi irë jarët initi aliti dolit galli dal	70 11201 18185 11801 61511 8161 1801
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES	
City & State		City & State		4. FEI Number 65-0838143	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current I	Registered Agent		7. Name and Address of New Registered	
ULRICH, RICHARD A					
	JTH TAMIAMI TRAIL		Street Addres	ss (P.O. Box Number is Not Acceptable)	
SARASOTA FL 34239					
			City	F	Zip Code
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: Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State				Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10,	OFFICERS AND	· <u></u>	11.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 11
TITLE	DP	☐ Delete	TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	REYNOLDS, WILLIAM GREG 2439 BEE RIDGE ROAD		NAME STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34239		CITY-ST-ZIP	•	
TITLE	DVST	☐ Delete	TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	GILLILAND, RICHARD K 2439 BEE RIDGE ROAD		NAME STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34239		CITY-ST-ZIP		-
TITLE	 	☐ Delete	TITLE		Change Addition
NAME			NAME		
STREET ADDRESS (CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		
TITLE		□ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		_ ~~ ~
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		
	 		4	·	Change Cladding
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition
Street address			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			NAME STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		}
12. hereby c	ertify that the information supplied with	this filing does not qualify for	the exemption stated in	Section 119.07(3)(i), Florida Statutes, I further co	ertify 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:

JOHNED D NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

attachment

August 14, 2003

To Whom It May Concern, Cascade Realty, Inc., document #P98000038154, FEI #65-0838143, never

smraz@prudentialcascade.com Administrative Assistant Shana Mraz received the first notice in January. I have been instructed by Doug at Internet Access to include this explanation along with our check for \$150.00.

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