567-6733

FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE;

May 01, 2001 8:00 am Secretary of State DOCUMENT # P98000038404 1. Entity Name LANGFORD ENTERPRISES OF VERO BEACH, INC. 05-01-2001 90116 048 ***158.75 Principal Place of Business Mailing Address 1749 OLD DIXIE HWY. 1749 OLD DIXIE HWY. VERO BEACH FL 32960 VERO BEACH FL 32960 2. Principal Place of Business 3. Mailing Address 131 - 11th Court Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0835819 Vero Beach, Florida Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 32962 <u>Indian River</u> 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Langford, Dyana CLARK, ROBERT C Street Address (P.O. Box Number is Not Acceptable) 131 - 11th Court 1936 14TH AVE. VERO BCH FL 32960 Vero Beach entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Dyana Langford, Registered (NOTE: Registered Agent signature required when reinstating FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) X Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PTD Change ★ Addition ☐ Delete TITLE TITLE ۷D LANGFORD, DYANA NAME NAME Santangelo, Mark R. STREET ADDRESS STREET ADDRESS 131 11TH CT. 251 - 11th Court Vero Beach, Florida 32962 CITY-ST-ZIP CITY-ST-ZIP VERO BCH FL 32962 VSD ☐ Change Addition ☐ Delete TITLE TITLE LANGFORD, PERCY NAME NAME STREET ADDRESS STREET ADDRESS 131 11TH CT. CITY-ST-7IP CITY-ST-ZIP VERO BCH FL 32962 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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

byana Langford, President/Director

G OFFICER OR DIRECTOR