FILED
Mar 27, 2003 8:00 am
Secretary of State
03-27-2003 90093 006 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

80064293

DOCUMENT # P98000044181

1. Entity Name
GEN-CIN ENTERPRISES, INC.

Principal Place of Business	Mailing Address
4104 DELTONA BLVD SPRING HILL, FL 34606	10515 NODDY TERN RD BROOKSVILLE, FL 34613

2. Principal Place of Business	3. Mailing Address
	8566 Beach Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc. SPRING HILL
City & State	City & State Florida
Zip / Country	Zip 34606 / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3512720 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RICHARDS, CINDY A
~~10515 NODDY TERN~~ RD. 8566 Beach Rd
~~BROOKSVILLE, FL 34613~~ SPRING HILL Fl 34606

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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 $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	PT RICHARDS, CINDY A 10515 NODDY TERN RD. BROOKSVILLE, FL 34613	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 8566 Beach Rd SPRING HILL Fl 34606
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP RICHARDS, EUGENE J 10515 NODDY TERN RD. BROOKSVILLE, FL 34613	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 8566 Beach Rd SPRING HILL Fl 34606
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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: Cindy A Richards / Pres. 3/25/03 352-683-5371
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #