2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P98000046692

DOCUMENT# 1. Entity Name

BARBARA L. GUDGEL, INC.



FILED Apr 30, 2003 8:00 am Secretary of State
04-30-2003 90105 029 ***150.00

						WE WE	TRU				
Principal Plac 200 CEVERA DUNDIN FL 3	DR	s ·	20	iling Address O CEVERA DR JNDIN FL 34699				İ	•		<i>.</i>
DONDIN 12 3	1030	·		MONTE STORY			• •			AND ÉRANA ÎNDIA ANDR	
Principal Place of Business 3: Mailing Address											
Suite, Apt.	#, etc.		s	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State				City & State				4: FEI Number 59-3511419 Applied For Not Applicable			
Zìp		Country	Z	Zip Country				5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent						T		7. 1	Name and Address of New Registere	ed Agent	
Name											
GUDGEL, BARBARA L						Street Ad	ldress (f	P.O. B	Box Number is Not Acceptable)		
200 CEVERA DR DUNDIN FL 34698								`.			
DUNDIN FL 34090									<u> </u>		
			1.4			City		-	· F	Zip Cod	е
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											
			-	1					1		
		!!: FEE IS \$156 03 Fee will be !							9. Election Campaign Financing	_ \$5.0	May Be
									Trust Fund Contribution.	Added	to Fees
Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11.								ΑD	 DITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 11
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12. I hereby c	ertify that the	e information supp	olled with this filir	ig does not qualify fo	or the exer	mption state	d in Sec	ction 1	119.07(3)(i), Florida Statutes. I further	certify that the in	nformation

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: