2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000053924

Entity Name: BONNIE FLECKNER, INC.

FILED Mar 11, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8632 GRIFFIN RD COOPER CITY, FL 33328 **Current Mailing Address: New Mailing Address:** P.O. BOX 290972 P.O. BOX 293000 DAVIE, FL 33329 **DAVIE, FL 33329** FEI Number: 65-0849400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FLECKNER, BONNIE FLECKNER, BONNIE S PRES. 8632 GRIFFIN RD 8632 GRIFFIN RD COOPER CITY, FL 33328 COOPER CITY, FL 33328 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: BONNIE FLECKNER 03/11/2003 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete (X) Change () Addition Title: FLECKNER, BONNIE FLECKNER, BONNIE S Name: Name: 9220 OAK GROVE CIRCLE 9220 OAK GROVE CIRCLE Address: Address: City-St-Zip: DAVIE EL City-St-Zip: **DAVIE, FL 33328** Title: VΡ Title: () Change () Addition () Delete Name: WOLF, JULIE F Name: 8740 SW 52 ST Address: Address: COOPER CITY, FL 33328 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition WOLF, WILLIAM H III Name: Name: 8740 SW 52 ST Address: Address: City-St-Zip: COOPER CITY, FL 33328 City-St-Zip: Title: () Delete Title: () Change () Addition FLECKNER, DONALD Name: Name: Address: 9220 OAK GROVE CIR Address: City-St-Zip: **DAVIE, FL 33328** 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: BONNIE FLECKNER PRES 03/11/2003