

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90119 033 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000055805

1. Entity Name
ELECTRIC COW PRODUCTIONS, INC.



100/4010

Principal Place of Business
815 VIRGINIA DRIVE
ORLANDO, FL 32803

Mailing Address
815 VIRGINIA DRIVE
ORLANDO, FL 32803

2. Principal Place of Business
5324 Windridge Lane
Suite, Apt. #, etc.

3. Mailing Address
5324 Windridge Lane
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Orlando, FL

City & State
Orlando, FL

4. FEI Number
59-3532779

Applied For
Not Applicable

Zip
32810

Country
Orange

Zip
32810

Country
Orange

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KETTERMAN, MAX
1288 MOSSWOOD CHASE
TALLAHASSEE, FL 32312

Name

Street Address (P.O. Box Number is Not Acceptable)
725 Eagle View Circle

City
Tallahassee FL Zip Code
32311

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
P
ROWE, JUSTYN
6324 WINDRIDGE LANE
ORLANDO, FL 32810 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
5324 Windridge Lane
Orlando, FL 32810

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
KETTERMAN, MAX
1288 MOSSWOOD CHASE
TALLAHASSEE, FL 32312 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
725 Eagle View Circle
Tallahassee, FL 32311

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: Max Ketterman Max Ketterman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/03

850-487-1349

DATE

Daytime Phone #

CR2E034 (10/02)