2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P98000070326 **DOCUMENT #**

1. Entity Name



Apr 23, 2003 8:00 am Secretary of State 04-23-2003 90157 015 ***150.00

MOTHER EARTH INVESTMENT CLUB, INC.						3 30137 013	130.	00
Principal Place of Business 4214 C. LAKE UNDERHILL RD. ORLANDO FL 32803 Mailing Address POST OFFICE BOX 540252 ORLANDO FL 32803 ORLANDO FL 32854					I kodanega na 1880 kada poni Bana	88 70 88 70 88 70 1 88 0		14 718 C 171 1 13 1
2. Principal Place of Business		3. Mailing Address				#### ## ##############################		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 59-347474	140t Applicabl		
Zip	Country	Zip	Country		5. Certificate of Status Desired		.75 Add	
	6. Name and Address of Current	Registered Agent			7. Name and Address of New	Registered Age	nt	
MORGAN, FAYE				Faye Morgan.				
243 W. PARK AVENUE					O. Box Number is Not Acceptate 12 10 13 Early 10 10 10 10 10 10 10 10 10 10 10 10 10	əle) ——————		
SUITE 101 WINTER PARK FL 32789				City Of a number			Za Code	
				CITY YULANDO		FL	328	04
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 gent. FAYE MORGAN SIGNATURE								
Signaturer typed or printed name of legistered agent and title if all plicable. (NOTE: Registered Agent signature required when reinstating) DATE								
F	ILE NOW!!! FEE IS \$150.00				9. Election Campaign I	Financiaa	es o	0 0-
After May 1,2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					Trust Fund Contribut	· -		May Be to Fees
10.	OFFICERS AND	DIRECTORS	11.	•	ADDITIONS/CHANGES TO O	FFICERS AND DIF	RECTORS	3 IN 11
TITLE	PD 🖟	Delete	TITLE	TD	· aloh	, 🔲] Change	Addition
NAME	RUSSELL, KATHERINE		NAME	Ela	ine o'Bryant			ĺ
STREET ADDRESS	600 N. KNOWLES AVENUE #5		STREET ADDRE	ss 141	6 oriole Avem	le.		}
CITY-ST-ZIP	WINTER PARK FL 32789		CITY-ST-ZIP		lando, FL 32		<i>-</i>	
TITLE	VPD	Delete	TITLE	VP	h Austin	DE.	Change	Addition
NAME STREET ADDRESS	MYRICK, JAYE 4214-C LAKE UNDERHILL RD		NAME STREET ADDRE	S 210	31 Wilder Lane			
CITY-ST-ZIP ·-	ORLANDO FL-32803	المراضية والمستدر سيدارا	- CITY-ST-ZIP		lando, FL 328			
TITLE	THE STATE OF THE S	☐ Delete	TITLE	Dire	ctor/D	<u></u>	Change	Addition
NAME	SIMPSON, LAURA		NAME	3.,0			5	_
STREET ADDRESS	600 GOLFPARK DRIVE		STREET ADDRE	SS				1
CITY-ST-ZIP	CELEBRATION FL 34747		CITY-ST-ZIP					
TITLE	SD	Delete	TITLE	SD	A - Aradamana] Change	Addition
NAME	STULTZ, JENNIFER		NAME	Mar	the Anderson	'hu vt-		ĺ
STREET ADDRESS CITY-ST-ZIP	1410 N. FOREST AVENUE ORLANDO FL 32803		STREET ADDRE	SS SO 6	3 Queensbay C iedo, FL 327	65-512	,	
TITLE	D/	☐ Delete	TITLE	Pro	sident/PD	(P	Change	Addition
NAME	MORGAN, FAYE	223 2000	NAME	1,,,	36671710		Ť	_
STREET ADDRESS	2820 ELIZABETH AVE.		STREET ADDRE	ss				
CITY-ST-ZIP	ORLANDO FL 32804		CITY-ST-ZIP					
TITLE	D	☐ Delete	TITLE				Change	☐ Addition
NAME	MÄRTIN, TERESA	•	NAME CAREET ADDRES					
STREET ADDRESS CITY-ST-ZIP	6017 SHORE LINE DR ORLANDO FL 32819		STREET ADDRE	>>				ļ
201 OF EII	OUTUNE OF 350 19		OH 1-01-EIF					

12. I hereby certify that the information supplied with this filling 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 life empowered.

SIGNATURE: