


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

09-08-2003 90136 029 ****70.00
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000096425	
1. Entity Name Disaster Response Team, Inc.	

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business 12725 Windermere Isles Pl Suite, Apt. #, etc.		3. Mailing Address P.O. Box 770335 Suite, Apt. #, etc.	
City & State Windermere FL	City & State Orlando FL	4. FEI Number 59-3543030	Applied For Not Applicable
Zip 34786	Country Orange	Zip 32877	Country Orange
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name: Richard Roth	
Street Address (P.O. Box Number is Not Acceptable) 12725 Windermere Isles Pl	
City Windermere	Zip Code 34786

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: RR Richard Roth Sec/Treasurer DATE: 9/1/03

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT LYNN BEENEY 837 CHICAGO AVE ORLANDO, FL 32761	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. PRESIDENT WILLIAM WINTLER 7611 S. ORANGE BLOSSOM TR #119 ORLANDO, FL 32809	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRET TREAS RICHARD ROTH 12725 WINDERMERE ISLES PL WINDERMERE, FL 34786	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE <u>RR 9/1/03</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: RR Richard Roth Sec/Treasurer DATE: 9/1/03 305-481-0120

CR20345 (12/02)