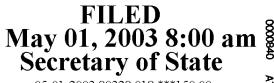
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000009233



1. Entity Nar AMERICO	·-	TY, INC.		0200		(8.0)		05-01-2003 9032	29 018 *	**150.0	0	=
			•	1262	:							
Principal Place of Business 2361 OAK HAMMOCK LN ORANGE PARK FL 32065			2361 (Mailing Address 2361 OAK HAMMOCK LN ORANGE PARK FL 32065								
2. Principal F	Place of Busin	ness	3. Mai	3. Mailing Address								
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & Sta	ite		City	City & State				FEI Number 59-3557726			plied For t'Applicable] :
Zip Country			Zip.		try	5. (Certificate of Status Desired [3.75 Add e Require			
	6. Name	and Address of Currer	nt Registere	d Agent		Name	7. 1	Name and Address of New Regis	tered Age	ent		}
ROBERTS, JOYCE]	
	(HAMMOCI	(LN				Street Add	ress (P.O. B	lox Number is Not Acceptable)		·		1
ORANGE	PARK FL 3	2065										
						City			FL	Zip Code	9	
the obligation	tions of regist		Role	up		ed office or re		einstating)	4/30 DATE	0/03		
Afte	r May 1, 20	03 Fee will be \$550.00 o Florida Department	of State					Election Campaign Financi Trust Fund Contribution.	ng 🗆		May Be to Fees	
10.	1_	OFFICERS ANI	D DIRECTO		11.		AD	DITIONS/CHANGES TO OFFICER]
NAME STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32065				☐ Delete		J			<u>L</u>] Change	Addition	CR2E034 (10/02)
TITLE NAME STREET ADDRESS	4.3	NA NA		TITLE NAM STRE				כ] Change	Addition	CR2	
CITY-ST-ZIP			· ~		CITY	ST-ZIP						-
NAME STREET ADDRESS CITY-ST-ZIP		,	NA/ STF			1] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		j] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>		☐ Delete	TITLE NAMI STRE					Change	Addition	†
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete] 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: