## 2003 FOR PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR) Mar 17, 2003 8:00 am Secretary of State DOCUMENT # P99000012117 1. Entity Name 03-17-2003 90466 036 \*\*\*150.00 REALTY RESOURCE CENTER, INC. Principal Place of Business Mailing Address 5220 S.W. 91ST TERRACE 5220 S.W. 91ST TERRACE GAINESVILLE FL 32608 GAINESVILLE FL 32608 2. Principal Place of Business 3. Mailing Address <u>7019 SW 93 Ave</u> 6745 SW 75<sup>17</sup>5t #355 Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State Gainesville 4. FEI Number Applied For ainesville 59-3562498 Not Applicable Country Country 32608 5. Certificate of Status Desired \$8.75 Additional 32608 U5A Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name. HUNT, THOMAS W Street Address (P.O. Box Number is Not Acceptable) 5220 S.W. 91ST TERRACE **GAINESVILLE FL 32608** City Zip Code 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. 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Addition NAME HUNT, THOMAS W STREET ADDRESS 5220 SW 91ST TERRACE 5745 SW75 th S+ #355 STREET ADDRESS CITY-ST-ZIP **GAINESVILLE FL 32608** CITY-ST-ZIP Gaines ville, FL 32608 TITLE ST ☐ Delete TITLE Change ■ Addition NAME HUNT, KATHY NAME 5745 SW 75th S+ #355 STREET ADDRESS 5220 SW 91ST TERRACE STREET ADDRESS CITY-ST-ZIP **GAINESVILLE FL 32608** Gainesville, FL 32608 CITY-ST-ZIP TITLE **VPBO** ☐ Delete TITLE Change ☐ Addition NAME JOHNSON, JEAN ANNE NAME STREET ADDRESS 5220 SW 91ST TERRACE 5745 SW 75# St #355 STREET ADDRESS CITY-ST-ZIP **GAINESVILLE FL 32608** CITY-ST-ZIP Gainesville, FL 32608 TITLE ☐ Delete TITLE ☐ Change NAME Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 Thereby certify that the information supplied with this limits does not quality for the exemption stated in Section 113.07(3)(1), Florida Statutes, Florida Statutes, Florida Statutes, Florida Statutes, and that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

Thomas WHunt

**FILED**