2000 UNIFORM BUSINESS REPORT (UBR) 5/31/00-90007-037-\$150.00-\$150.00

SUBANCE PARK FL 20073 2. Principal Place of Business 3. Mailing Address Subs. Apt. F. etc. DO NOT WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE City & State SHETON, SUSAN G SHETON	DOCUMENT # P990000 1. Entity Name PROVIDENCE REAL ESTATE, INC.	30029	¥			FII E	: D		
Suite. Apt. 8, anc. Suite. Apt. 8, anc. Suite. Apt. 8, anc. Do Not Writter IN THIS SPACE		DAK LN. 540 WILLOW OAK LN.				JUN 27	AM 10: 5		
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Security	City & State	City & State			4. FEI Number 59-356 70	45			
SHELTON, SUSAN G 540 WILLOW-OAK I.N., ORANGE PARK R. 32073 City FL 7th Code City	Zip Country	ZIp	Coun	iry					
SHELTON, SUSAN G Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named enryly ubmits this statement for try physical of changing its registered agent, or both, in the State of Florida. SKGNATURE	6. Name and Address of Current	Registered Agent	·——-	Name	7. Name and Address of	New Registered	Agent		
8. The above named entry Lubmits this statement for thy process of changing its registered office or registered agent, or both, in the State of Fonda. SIGNATURE SUMAN, typed promot rank of requirement agent was the specialist in the State of Fonda. SIGNATURE SUMAN, typed promot rank of requirement and requirement agent was the special process. (See criteria on back.) OFFICERS AND DIRECTORS TILE NAME SHELTON, SUSAN G SHELTON, SUSAN	540-WILLOW-OAK-LN.	40-WILLOW OAK-LN.							
8. The above named enth submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE S	• •			City		FI	Zip Cod	e	
Tax tiling requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 So. Change Addition Addition	8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 3/3/20								
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SIGNATURE: SIGNATURE: 3/5/00 278-0600	 I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or ruster empt changed, or on an attachment with an address. 	this filing does not qualify to true and accurate will that r owered to execute this report with all other like ampowered	r the exemy signate an require	mption stated in Sectors shall have the state of the stat	ction 119.07(3)(i), Florida Str ame legal effect as if made Florida Statutes; and that n	nger oath; that i ny name appears i	am an onicer in Block 11 or Qob	nformation or director r Block 12 if	
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