FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P990000 38604

SIGNATURE:

FILED Feb 13, 2003 8:00 am Secretary of State

02-13-2003 90223 023 ***150.00

Lord	Charities,	Inc.			
	in Magazina di Panganana	IN THIS SI	PACE		
Principal Place of Business Musgrove Circle		3. Mailing Address 4 Musgrove (Circle		%
Suite, Apt. #. etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State Hilton Head Island, SC		City & State Hilton Head Island, SC		4. FEI Number 58 246 4809	Applied For Not Applicable
^{Zip} 29926	Country	^{Zip} 29926	Country	5. Certificate of Status Desired	See Required
140.44			10.2	7. Name and Address of Current	Registered Agent
i.	O-NOT-W	RITE :		P.O. Box Number is Not Acceptable	
() ()	ithis sf	ACE	320	o e. rain ave	nuc.
		City Talla		<i>thassee</i>	FL Zip Code 3a301
8. The above named entity	submits this statement fo	r the purpose of changing its	registered office or register	ed agent, or both, in the State of Flo	rida.

Tax filing r	equirement and elects to do so.	regio (550.00 m² UBRIS SAL25 mas Joueparimento (514.6	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
11.	· OFFICERS AND DIRECTORS	Will District the State of the	THE STATE OF THE STATE OF			
TITLE NAME STREET ADDRESS CITY+ST+ZIP	Timothy Sweeny 4 Musgrove Circle Hilton Head Island, SC 29926	PROVED TO THE PROPERTY OF THE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		STREET ALDRESS BY AND		ger#		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ANALOS SE CONTRACTOR C	DO NOT WRITE	745 de 1 1815 de 1 1815 de 1815 de 18		
TITLE NAME STREET ADDRESS CITY-57-ZIP		GTAL AND	HIN THIS SPACE			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	1,	THE STATE OF THE S				
13. I hereby certify that the information supplied with this filing does not chalify 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 thy 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 11 or on an attachment with an address, with all other like empowered.						