

2000 UNIFORM BUSINESS REPORT (UBR)

5/15/00-90169-004-\$150.00-\$150.00

DOCUMENT # P99000048896

1. Entity Name

PROACTIVE HEALTH, INC.

FILED

00 JUN -8 PM 4:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2101 OAK HILL DR.
VALRICO FL 33594

Mailing Address

2101 OAK HILL DR.
VALRICO FL 33594-4635

2. Principal Place of Business

2101 OAK HILL DR

Suite, Apt. #, etc.

3. Mailing Address

2101 OAK HILL DR

Suite, Apt. #, etc.

City & State

VALRICO, FL

Zip 33594

Country USA

City & State

VALRICO, FL

Zip 33594

Country USA

4. FEI Number

59-3578629

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIVEY, KELLY
2101 OAK HILL DR.
VALRICO FL 33594

7. Name and Address of New Registered Agent

Name *None*

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE *President*
NAME *Kelly M Spivey*
STREET ADDRESS *Valrico FL 33594*
CITY-ST-ZIP *2101 Oak Hill Dr.*

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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CITY-ST-ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)