2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 12, 2003 8:00 am
Secretary of State
04-16-2003 90131 026 ***150.00

DOCUMENT # P99000090033

1. Entity Name
HOME PLATE CAFE, INC.

Principal Place of Business	Mailing Address
2072 HENDRY ST FT MYERS FL 33901	2072 HENDRY ST FT MYERS FL 33901

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0953270 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MACELHINEY, WALLACE F 4 SPORTSMAN LANE ROTONDA WEST FL 33947	Name: George S. Sinko Street Address (P.O. Box Number is Not Acceptable): 3421 Sabal Springs Blvd City: Ft. Myers FL Zip Code: 33917

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.

SIGNATURE _____ 4/01/03
Signature, 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
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. NO ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MACELHINEY, WALLACE F 4 SPORTSMAN LANE ROTONDA WEST FL 33947	☑ Delete	D-P George S. Sinko 3421 Sabal Springs Blvd Ft. Myers, FL 33917	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MACELHINEY, AUDREY J 4 SPORTSMAN LANE ROTONDA WEST FL 33947	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MELLEN, JEAN E 4 SPORTSMAN LANE ROTONDA WEST FL 33947	☑ Delete	D-S-T Mellen, Jean E 4 Sportsman LANE ROTONDA WEST FL 33947	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

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: SIGNATURE REQUIRED _____ 4/01/03 239-332-4468
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR George S. Sinko — Date — Daytime Phone #