

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90231 041 ***185.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000103476 1. Entity Name WHITE OAK BRANDON CREEK, INC.		
Principal Place of Business 322 BANYAN BLVD. W. PALM BCH, FL 33401		Mailing Address P.O. BOX 4961 ORLANDO, FL 32802
2. Principal Place of Business 422 7TH STREET Suite, Apt. #, etc. #2		3. Mailing Address 422 7TH STREET Suite, Apt. #, etc. #2
City & State WEST PALM BCH, FL Zip Country 33401 USA		4. FEI Number 65-1006243 Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 N. ORANGE AVENUE, STE. 1100 ORLANDO, FL 32801
7. Name and Address of New Registered Agent Name PAULA J. RYAN Street Address (P.O. Box Number is Not Acceptable) 422 7TH STREET #2 City State Zip Code WEST PALM BCH FL 33401		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 DATE 4/23/03
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. ☐ \$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 RYAN, PAULA J 322 BANYAN BLVD. W. PALM BCH, FL 33401	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D RYAN, PAULA J. 422 7TH STREET, #2 WEST PALM BCH, FL 33401
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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
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 information empowered.		
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE 4/23/03 TELEPHONE # 202 888 8888

CR20034 (10/02)