FILED
Apr 21, 2003 8:00 am
Secretary of State
04-21-2003 90383 040 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S19187

1. Entity Name
UNITED PROGRAMING, INC.

Principal Place of Business	Mailing Address
380 GULFSHORE BLVD. S NAPLES, FL 34102 US	380 GULFSHORE BLVD. S NAPLES, FL 34102 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
601 Jacana Circle	601 Jacana Circle
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Naples, FL	City & State: Naples , FL
Zip: 34105 Country: U.S.	Zip: 34105 Country: U.S.

4. FEI Number: 65-0234336 ☐ 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
WISEMAN, TAMELA EADY ES 600 FIFTH AVE S SUITE 301 NAPLES, FL 34102	Name: Peter L. Keeley, Esq. Street Address (P.O. Box Number is Not Acceptable): Grant, Fridkin, & Pearson 5551 Ridgewood Drive, Suite 501 City: Naples FL Zip Code: 34108

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 [signature] Peter L. Keeley, Esq. 4/17/03
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. ☐ $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	P PUOPOLO, LOUIS A. 380 GULFSHORE BLVD. NAPLES, FL 34102	☐ Delete	P Puopolo, Louis A. 601 Jacana Circle NAples, FL 34105	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPS PUOPOLO, HELEN E 380 GULFSHORE BLVD. NAPLES, FL 34102	☐ Delete	VPS Puopolo, Helen E. 601 Jacana Circle NAples, FL 34105	☒ 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
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 like empowered.

SIGNATURE: [signature] – Louis A. Puopolo 4/17/03 239-430-6230
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)