

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 19, 2001 8:00 am
Secretary of State

05-16-2001 90009 018 ***150.00

DOCUMENT # S44726

1. Entity Name
RAPTURE ENTERPRISES, INC.

Principal Place of Business
**748 VIA LIDO NORD
 NEWPORT BEACH CA 92663**

Mailing Address
**748 VIA LIDO NORD
 NEWPORT BEACH CA 92663**

2. Principal Place of Business
c/o Tremaine Foundation
 Suite, Apt. #, etc.
290 Pratt Street
 City & State
Meriden, CT
 Zip
06450

3. Mailing Address
c/o Tremaine Foundation
 Suite, Apt. #, etc.
290 Pratt Street
 City & State
Meriden, CT
 Zip
06450

Country
USA

4. FEI Number **65-0262975** Applied For
 Not Applicable

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

49005



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**HURLEY, JAMES N.
 5915 PONCE DE LEON BLVD.
 #63
 MIAMI FL 33146**

7. Name and Address of New Registered Agent
 Name
S. Thomas Hamilton, Jr.
 Street Address (P.O. Box Number is Not Acceptable)
655 21st Street, Suite 200
 City
Vero Beach FL Zip Code
32960

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 DATE **6/13/01**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

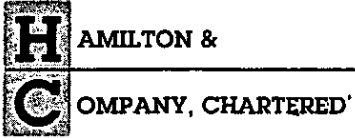
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00. After MAY 1, 2001 Fee will be \$550.00. Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP CAINE, WILLIAM A., JR 748 VIA LIDO NORD NEWPORT BEACH CA	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	President/Director Burton G. Tremaine 150 Sago Palm Road Vero Beach, FL 32960	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST CAINE, TEMMY L 748 VIA LIDO NORD NEWPORT BEACH CA	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS HURLEY, JAMES N. 5915 PONCE DE LEON BLVD MIAMI FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Burton G. Tremaine** 3-14-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



Certified Public
Accountants

Members

FICPA AICPA

P.O. Box 6370
Vero Beach, FL 32961-6370
Phone (561) 569-4200
FAX (561) 778-5215
655 21st Street, Suite 200
Vero Beach, FL 32960

S. Thomas Hamilton, Jr., C.P.A.

Joseph L. Hickey, C.P.A.
Pamela P. Young, C.P.A.
Timothy Collins, C.P.A.
Ralph E. Beach, III, C.P.A.

4434 TR

June 13, 2001

Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Rapture Enterprise, Inc.
EIN 65-0262975

Dear Sir/Madam:

Per your notice dated May 24, 2001 (copy enclosed), a copy of the 2001 Uniform Business Report (URB) for Rapture Enterprise, Inc., has been enclosed which has been executed on line 8 by the New Registered Agent.

Would you please acknowledge receipt of same by signing the enclosed copy of this letter, stamping the date received and returning it to us in the attached reply envelope.

Sincerely,

S. Thomas Hamilton, Jr.

STHjr:hh

Enclosures

RR# 7099 3400 0016 7056 0245

**PLEASE ACKNOWLEDGE RECEIPT BY SIGNING,
DATING AND RETURN THIS COPY IN THE
ENCLOSED REPLY ENVELOPE.**