FILED

Jul 28, 2003 8:00 am

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Secretary of State DOCUMENT # \$56180 07-28-2003 90137 029 ***150.00 1. Entity Name YOUNG AT HEART, INC. Principal Place of Business Mailing Address 901 US 27 NORTH 901 US 27 NORTH SUITE 51 SUITE 51 SEBRING FL 33870 SEBRING FL 33870 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State 4 City & State 4. FEI Number Applied For 59-3074866 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BARRETT, GWEN I Street Address (P.O. Box Number is Not Acceptable) 901 US 27 N SUITE 51 SEBRING FL 33870 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing **\$5.00** May Be After September 10, 2003 Fee will be \$750,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITI F ☐ Change ☐ Addition TITLE □ Delete BARRETT, GWEN I NAME NAME 901 US HWY 27 NORTH SUITE 51 STREET ADDRESS STREET ADORESS SEBRING FL 33870 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIR. ☐ Addition Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 apport 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 of true ee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver changed, or on an attachment w

SIGNATURE:

OFFINATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

//14/03

Daytime Phone #

AHachment #

11. 2002

July 14, 2003

In reply to: 593074866

DIVISION OF CORPORATIONS

UNIFORM BUSINESS REPORT FILINGS

P.O. BOX 1500

TALLAHASSEE, FL 32302-1500

YOUNG AT HEART TRAVEL YOUNG AT HEART, INC.

-901 US HWY 27 N, STE 51 SEBRING FL 33870

PHONE 863 385 3772 FAX 863 382 0440 youngathearttravel@earthlink.net

Dear Sir or Madam:

I did not receive the prior notice. Please waive the penalty. We are a travel agency and as many business severely hurt by the Sept. 11 tragedy. This additional expense would truly be a hardship. We will sign up for the electronic email notification to prevent such occurrence from happening again.

Respectfully,

GWEN (BARRETT) YOUNG