2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V07609

1. Entity Name



FILED Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90977 021 ***150.00

GEORGE P. FLETCHER, INC.							02 21 2005 .	J0J77 0 21	150	.00
Principal Place 105 SUWANNE BRANFORD FL US		Mailing Address P O BOX 578 BRANFORD FL 32008 US								
2. Principal F \$5 0 4	Place of Business Terrace	3. Mailing Address								EN BIEN HER
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & Star	te	City & State				4. FEI Number 59-3099712 . Applied For Not Applicable				
Zip	Country	Zip	Count	try		5. Certificate of	Status Desired	□ \$8.7	5 Add	ditional
	6. Name and Address of Curren	t Registered Agent				7. Name and A	ddress of New Re		-	
FLETCHER, GEORGE P 208 SW PLANT AVE BRANFORD FL 32008				Street A	oddress (P.	O. Box Number it	s Not Acceptable)	اً	n Code	
the obligation	e named entity submits this statement tions of registered agent Signature, typed or plinted name of spistered agent ILE NOW!!! FEE IS \$150.00	1 Ge	2019	e P.	Flet	d agent, or both,	res.	rida. I am familiai		and accept
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State						II	on Campaign Fina Fund Contribution	· -		O May Be to Fees
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS/CH	IANGES TO OFFI	CERS AND DIREC	CTORS	3 IN 11
NEME STREET ADDRESS	P FLETCHER, GEORGE P. 208 SW PLANT AVE BRANFORD FL 32008	☐ Delete			85 B		2md Ter F132		ange	☐ Addition
NAME STREET ADDRESS	ST FLETCHER, IVA T 208 SW PLANT AVE. BRANFORD FL	☐ Delete			850	, ,,,,	nd Terr	**************************************	ange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete						☐ Ch	ange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP				□ Ch	ange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREE CITY-	T ADDRESS				☐ Ch	ange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with	Delete	CITY-5		ad in Sect	ien 110 07/04% 5	Jorida Ctatana	□ Ch		Addition

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 attackment with an address with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: 2