

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2003 8:00 am
Secretary of State

04-29-2003 90053 002 ***150.00

DOCUMENT # V28501

1. Entity Name
FENCOVE FLORIDA, INC.



Principal Place of Business
**238 S.W. 1ST ST.
F-7
POMPANO BEACH FL 33062
US**

Mailing Address
**P.O. BOX 970
6 COVE RD.
FENELON FALLS. ONTARIO CAN. K0M1N-0**

2. Principal Place of Business
3211 DOVER ROAD
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
POMPANO BEACH FLORIDA

City & State

4. FEI Number
65-0335842

Applied For
Not Applicable

Zip
33062-1209

Country
U.S.A

Zip

Country

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

**EDWARDS, RICHARD
238 S.W. 1ST STREET STE F-7
STE F-7
POMPANO BEACH FL 33062**

Name
EDWARDS, RICHARD

Street Address (P.O. Box Number is Not Acceptable)
3211 DOVER ROAD

City **POMPANO BEACH FL** Zip Code **33062-1209**

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 \$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 ☐ Delete
NAME **DP**
STREET ADDRESS **EDWARDS, RICHARD**
CITY-ST-ZIP **238 S.W. 1ST STREET
POMPANO BEACH FL 33060**

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **3211 DOVER RD.**
CITY-ST-ZIP **POMPANO BEACH FLA 33062-1209**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **EDWARDS, EDITH**
CITY-ST-ZIP **238 S.W. 1ST STREET
POMPANO BEACH FL 33060**

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **3211 DOVER ROAD**
CITY-ST-ZIP **POMPANO BEACH FLA 33062-1209**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
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☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Richard L. Edwards (RICHARD L. EDWARDS)

APRIL 18/03

705-887-1867

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)