

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90373 029 ***150.00

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DOCUMENT # F02000006016

1. Entity Name
MILESTONE HOLDING ONE, INC.



Principal Place of Business Mailing Address
% RONALD A. OLEYNIK, ESQ./HOLLAND & KNIGHT **% RONALD A. OLEYNIK, ESQ./HOLLAND & KNIGHT**
2099 PENNSYLVANIA AVE. NW STE 100 **2099 PENNSYLVANIA AVE. NW STE 100**
WASHINGTON DC 20006-1816 **WASHINGTON DC 20006-1816**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For
01-0625743 Not Applicable

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

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

KILBRIDE, ROBERT L ESQ VP
THE WACKENHUT CORPORATION
4200 WACKENHUT DRIVE #100
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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 _____ (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 **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHANSEN, LARS N GROUP 4 FALCK A/S/POLITORVET, DK-1780 COPENHAGEN V, COP., DENMARK	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LUNDSBERG-NIELSEN, SOREN GROUP 4 FALCK A/S/POLITORVET, DK-1780 COPENHAGEN V, COP., DENMARK	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MILLER, DERRICK GROUP 4 FALCK A/S/POLITORVET, DK-1780 COPENHAGEN V, COP., DENMARK	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT IAN GREEN 4200 WACKENHUT DR #100 PALM BEACH GARDENS, FL 33410-4243	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DANIEL E. MASON 4200 WACKENHUT DR #100 PALM BEACH GARDENS, FL 33410-4243	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ROBERT L. KILBRIDE 4200 WACKENHUT DR #100 PALM BEACH GARDENS, FL 33410-4243	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: **9/29/03** Date
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/02)