

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90364 002 ***150.00

DOCUMENT # F94000000220

1. Entity Name
MILESTONE ASSET MANAGEMENT, INC.



Principal Place of Business
**150 E PALMETTO PARK RD
4TH FL
BOCA RATON FL 33432
US**

Mailing Address
**150 E PALMETTO PARK RD
4TH FLOOR
BOCA RATON FL 33432
US**



2. Principal Place of Business

200 Congress Park Dr.
Suite, Apt. #, etc.
Suite 103

City & State
Delray Beach, FL

Zip Country
33445 USA

3. Mailing Address

200 Congress Park Drive
Suite, Apt. #, etc.
Suite 103

City & State
Delray Beach, FL

Zip Country
33445 USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **52-1843631**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

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 _____
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

TITLE **S** ☐ Delete
NAME **OTTO, JOSEPH**
STREET ADDRESS **150 EAST PALMETTO PARK ROAD SUITE 400**
CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **D** ☐ Delete
NAME **MANDOR, ROBERT**
STREET ADDRESS **150 E PALMETTO PARK RD, 4TH FLR**
CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **D** ☐ Delete
NAME **MCAHON, GREG**
STREET ADDRESS **150 E PALMETTO PARK RD, 4TH FLR**
CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **200 Congress Park Drive, Suite 103**
CITY-ST-ZIP **Delray Beach, FL 33445**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **200 Congress Park Drive, Suite 103**
CITY-ST-ZIP **Delray Beach, FL 33445**

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TITLE ☐ Change ☐ Addition
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: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/03 (561) 394-9260
Date Daytime Phone #

CR2E034 (10/02)