

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90007 009 ***150.00

DOCUMENT # F97000002549

1. Entity Name

STIRLING COOKE NORTH AMERICAN HOLDINGS LTD., INC

Principal Place of Business

Mailing Address

2801 FRUITVILLE ROAD
 SUITE 240
 SARASOTA FL 34237

P O BOX 49077
 SUITE 240
 SARASOTA FL 34230-6077
 US

2. Principal Place of Business

6311 ATRIUM DR

3. Mailing Address

P.O. BOX 49077

Suite, Apt. #, etc.

100

Suite, Apt. #, etc.

City & State

BRADENTON, FL

City & State

SARASOTA FL

4. FEI Number

51-0354927

Applied For

Not Applicable

Zip

34202

Country

USA

Zip

34230

Country

USA

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

**F&L CORP
 THE GREENLEAF BLDG, 200 LAURA STREET
 JACKSONVILLE FL 32202**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2000 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD JONES, GEORGE W 65 LEADENHALL STREET LONDON EC3A 2AD ENGLAND	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOUSTON, KAY 2801 FRUITVILLE ROAD, STE 240 SARASOTA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD COOKE, PENELOPE A 11 VICTORIA ST., 3RD FL HAMILTON HM11, BERMUDA	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD COOKE, NICHOLAS M 11 VICTORIA ST., THIRD FLOOR HAMILTON, HM11, BERMUDA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST HOUSTON, KAY 6311 ATRIUM DRIVE, #100 BRADENTON FL 34202	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOKE, PENELOPE 11 VICTORIA ST., THIRD FLOOR HAMILTON, HM11 BERMUDA	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEN QUICK 5400. LBJ FREEWAY, STE 880 DALLAS, TX 75240	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment, with an address, with all other like empowered.

SIGNATURE:

Kay Houston

KAY HOUSTON

2/1/00

Date

944 907 2000

Daytime Phone #

CR2E034 (9/99)