

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J34559

FILED
Apr 02, 2002 8:00 AM
Secretary of State

Entity Name: ASR ASSOCIATES, INC.

Current Principal Place of Business:

1283 LAKE DESSON POINT
P.O. BOX 90849
LAKELAND, FL 33805 US

New Principal Place of Business:

1050 REFLECTIONS LAKE LOOP
LAKELAND, FL 33813 US

Current Mailing Address:

1283 LAKE DESSON POINT
P.O. BOX 90849
LAKELAND, FL 33805 US

New Mailing Address:

P.O. BOX 5138
LAKELAND, FL 338075138 US

FEI Number: 59-2740146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEAVER PAUL R.
1283 LAKE DEESON POINT
LAKELAND, FL 33805 US

Name and Address of New Registered Agent:

WEAVER, PAUL R
1050 REFLECTIONS LAKE LOOP
LAKELAND, FL 33813 US

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: PAUL R. WEAVER

04/02/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: WEAVER, PAUL R.,
Address: 1283 LAKE DEESON POINT
City-St-Zip: LAKELAND, FL

Title: DS () Delete
Name: WEAVER, SANDRA D.,
Address: 1283 LAKE DEESON POINT
City-St-Zip: LAKELAND, FL

Title: DV () Delete
Name: MCGEE, TED L
Address: 2023 COMPANERO AVE
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: WEAVER, PAUL R.,
Address: 1050 REFLECTIONS LAKE LOOP
City-St-Zip: LAKELAND, FL 33813

Title: DS (X) Change () Addition
Name: WEAVER, SANDRA D.,
Address: 1050 REFLECTIONS LAKE LOOP
City-St-Zip: LAKELAND, FL 33813

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL R. WEAVER

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04/02/2002

Electronic Signature of Signing Officer or Director

Date