

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L52786

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: AMERICA'S SENIOR FINANCIAL SERVICES, INC.

Current Principal Place of Business:

9501 NE 2ND AVENUE
MIAMI SHORES, FL 33128 US

New Principal Place of Business:

Current Mailing Address:

9501 NE 2ND AVENUE
MIAMI SHORES, FL 33128 US

New Mailing Address:

FEI Number: 65-0181535 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHERMAN, THOMAS G., ESQUIRE
218 ALMERIA AVE.
CORAL GABLES FL, FL 33134 US

Name and Address of New Registered Agent:

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: _____

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: CED () Delete
Name: LOCKE, NELSON JR
Address: 15921 SW 14 ST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: EVD () Delete
Name: LOCKE, CHERYL D
Address: 15921 SW 14 ST
City-St-Zip: PEMBROKE PINES, FL

Title: D () Delete
Name: KLUCK, CHARLES M
Address: 9501 NE 2ND AVE
City-St-Zip: MIAMI SHORES, FL 33138

Title: D () Delete
Name: SHERMAN, THOMAS
Address: 218 ALMERIA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: PD () Delete
Name: BUONO, MICHAEL
Address: 1070 E. INDIAN TOWN RD, STE 410
City-St-Zip: JUPITER, FL 33477

Title: TD () Delete
Name: GIRARD, DEAN
Address: 1070 E. INDIAN TOWN RD, STE 410
City-St-Zip: JUPITER, FL 33477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: NELSON LOCKE

_____ CED

_____ 04/30/2002

Electronic Signature of Signing Officer or Director

_____ Date