2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State
02-20-2002 90075 014 ****61.25

0040295

DOCUMENT # N44678

Entity Name

MEETING PROFESSIONALS INTERNATIONAL INCORPORATED

Principal Place of Business	Mailing Address
7 S BUNGALOW PARK AVE NIT D MPA FL 33609 S	307 S BUNGALOW PARK AVE UNIT D TAMPA FL 33609 US

000235037

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business	3. Mailing Address
PO Box 25282	PO Box 25282
Suite, Apt. #, etc.: PO	Suite, Apt. #, etc.
City & State: Tampa, FL	City & State: Tampa, FL
Zip: 33622-5282 Country	Zip: 33622-5282 Country

4. FEI Number: 31-1135141 ☐ Applied For ☐ Not Applicable

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
MOUNTFORD, SHERRY L 307 S BUNGALOW PARK AVE UNIT D TAMPA FL 33609	Name: same Street Address (P.O. Box Number is Not Acceptable): same no change City: **FL** Zip Code

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: Sherry L Mountford, VP Finance — DATE: 2/6/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MORGAN, LORI 2203 40TH STREET WEST BRADENTON FL 34205	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Kory Lake P 400 N Tampa St. Suite 2800 Tampa, FL 33602	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MISEYKO, RICHARD 6677 EMERSON AVENUE SOUTH SAINT PETERSBURG FL 33707	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mary Lou Spinelli D 1000 Boulevard of the Arts Sarasota, FL 34236	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MOUNTFORD, SHERRY 307 S BUNGALOW PARK AVE UNIT D TAMPA FL 33609	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	no change	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCGOWAN, DAWN 5853 BAYLAKE DRIVE SOUTH SAINT PETERSBURG FL 33708	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD McGowan, Dawn same	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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 617, 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: Sherry L Mountford VP Finance — Sherry L Mountford — 2/6/02 — 813-286-4036
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #