

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000070985

FILED  
Apr 29, 2002 8:00 AM  
Secretary of State

Entity Name: FM FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

1510 E COLONIAL DR, STE 214W  
ORLANDO, FL 32803

**New Principal Place of Business:**

1510 E COLONIAL DR, STE 304  
ORLANDO, FL 32803

**Current Mailing Address:**

1510 E COLONIAL DR, STE 214W  
ORLANDO, FL 32803

**New Mailing Address:**

1510 E COLONIAL DR, STE 304  
ORLANDO, FL 32803

FEI Number: 59-3663684

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ANDARGE, FOZIA M  
1510 E COLONIAL DR, STE 214W  
ORLANDO, FL 32803

**Name and Address of New Registered Agent:**

ANDARGE, FOZIA M  
1510 E COLONIAL DR, STE 304  
ORLANDO, FL 32803

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

04/29/2002

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: D ( ) Delete  
Name: ANDARGE, FOZIA M  
Address: 1510 E COLONIAL DR, STE 214W  
City-St-Zip: ORLANDO, FL 32803

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: ANDARGE, FOZIA M  
Address: 1510 E COLONIAL DR, STE 304  
City-St-Zip: ORLANDO, FL 32803

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: FOZIA M ANDARGE

D

04/29/2002

Electronic Signature of Signing Officer or Director

Date