

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

0519892 AV

02-20-2002 90066 034 ***150.00

DOCUMENT # P00000075342

1. Entity Name
ADMINISTRATIVE MANAGEMENT OF AMERICA, INC.

Principal Place of Business 3042 DOMINION COURT SAFETY HARBOR FL 34695-5246	Mailing Address 3042 DOMINION COURT SAFETY HARBOR FL 34695-5246
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State

4. FEI Number 59-3662779	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
**BROWN, FREDERICK W
 3042 DOMINION COURT
 SAFETY HARBOR FL 34695-5246**

7. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signatures, typed or printed name of registered agent and title if applicable.

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, 2002 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

TITLE POST	<input type="checkbox"/> Delete
NAME BROWN, FREDERICK W	
STREET ADDRESS 3042 DOMINION COURT	
CITY-ST-ZIP SAFETY HARBOR FL 34695-5246	
TITLE DC	<input checked="" type="checkbox"/> Delete
NAME BROWN, FREDERICK W	
STREET ADDRESS 3042 DOMINION CT	
CITY-ST-ZIP SAFETY HARBOR FL 34695-5246	
TITLE D	<input type="checkbox"/> Delete
NAME BROWN, SUSAN J	
STREET ADDRESS 3042 DOMINION CT	
CITY-ST-ZIP SAFETY HARBOR FL 34695-5246	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDST	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 2/4/2002 Daytime Phone #: (727) 725-1025

CR2E034 (9/01)