

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 22, 2002 8:00 am**  
**Secretary of State**

04-22-2002 90289 024 \*\*\*150.00

**DOCUMENT # P01000097034**

1. Entity Name  
**EQUITY EXPRESS LENDING AND INVESTMENTS, INC.**

Principal Place of Business      Mailing Address  
**1100 16 ST NORTH      1100 16 ST NORTH**  
**ST PETERSBURG FL 33705      ST PETERSBURG FL 33705**

2. Principal Place of Business      3. Mailing Address  
**6701 4th St N      Suite, Apt. #, etc.**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
**ST. PETERS - FL      ST. PETERS - FL**

Zip      Country      Zip      Country  
**33702      USA      33702      USA**

4. FEI Number      Applied For  
**59-3747309      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

**FINANCIAL FOUNDATIONS INC**  
**3150 SANDY RIDGE DR**  
**CLEARWATER FL 33761**

Name      **LARRY SWEENEY      Pres.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**1100 16th St N**  
**ST. PETERS - FL**  
 City      **FL**      **33705**

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      **LARRY SWEENEY      Pres.      4/10/02**  
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>P SWEENEY, LARRY</b>		NAME	
STREET ADDRESS <b>1100 16 ST NORTH</b>		STREET ADDRESS	
CITY-ST-ZIP <b>ST PETERSBURG FL 33705</b>		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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:      **LARRY SWEENEY      Pres.      4/10/02      895-0051**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/01)