

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000071365

FILED
Jan 13, 2002 8:00 AM
Secretary of State

Entity Name: SOUTHEAST SHORE PROPERTIES, INC.

Current Principal Place of Business:

1365 GINGER CIR
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

1365 GINGER CIR
WESTON, FL 33326

New Mailing Address:

2525 WAUKEGAN ROAD
SUITE 235
BANNOCKBURN, IL 60015

FEI Number: 65-0696119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDOBA, SEPHEN M
101 E. KENNEDY BLVD.
SUITE 3700 BARNETT PLAZA
TAMPA, FL 33602 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: PST () Delete
Name: BOYD, BRET J
Address: 1365 GINGER CIR
City-St-Zip: WESTON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: BOYD, BRET J
Address: 2525 WAUKEGAN ROAD, SUITE 235
City-St-Zip: BANNOCKBURN, IL 60015

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: BRET J. BOYD

PST

01/13/2002

Electronic Signature of Signing Officer or Director

_____ Date