

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 09, 2001 8:00 am
Secretary of State

02-09-2001 90206 028 ***150.00

DOCUMENT # P97000093750

1. Entity Name

AWAD ASSET MANAGEMENT, INC.

Principal Place of Business

Mailing Address

THE OFFICES OF RAYMOND JAMES FINANCIAL
 880 CARILLON PKY.
 ST. PETERSBURG FL 33733

THE OFFICES OF RAYMOND JAMES FINANCIAL
 880 CARILLON PKY.
 ST. PETERSBURG FL 33733

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **58-2372400**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JACOBS, RICHARD O
200 CENTRAL AVE., STE. 1600
ST. PETERSBURG FL 33701

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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, 2001 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DC	AWAD, JAMES D	ONE EAST END AVE. APT. 60	NEW YORK NY 10021	<input type="checkbox"/>
PD	HILL, STEPHEN G	880 CARILLON PARKWAY	SAINT PETERSBURG FL 33716	<input type="checkbox"/>
EVPD	DOWDLE, JEFFREY P	880 CARILLON PARKWAY	SAINT PETERSBURG FL 33716	<input checked="" type="checkbox"/>
ST	JULIEN, JEFFERY P	880 CARILLON PARKWAY	ST. PETERSBURG FL 33733	<input type="checkbox"/>
AST	PALSHA, GRACE	880 CARILLON PARKWAY	ST. PETERSBURG FL 33733	<input type="checkbox"/>
AST	EGAN, CAROL	880 CARILLON PARKWAY	ST. PETERSBURG FL 33733	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
CCO	Kenneth K. Koster	880 Carillon Pkwy	St. Petersburg, FL 33716	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
VP				<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:

J. Julien

Jeffrey P. Julien

01/25/01

727-573-3800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)