**FILED** 

## 2001 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nam		0073511	·	/ Secreta	001 8:00 a ry of Stat 90003 009 ***550.00	te	
Principal Place of Business Mailing Address  1189 EGRET CIRCLE SOUTH  JUPITER FL 33458 JUPITER FL 33458							
2. Principal Place of Business		3. Mailing Address		1   194   1980   148   1811   1811   1821   1821   1831   1831   1832   1833			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number 65-094205	A	plied For at Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	S8.75 Add Fee Required		
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New	Registered Agent		
SDIEGE) 8	UTRERA, P.A.	ىدادارى دەن ئىلىپ ئىلاھلىلىد <del>ى</del>	Name				
343 ALMERIA AVENUE			Street Address	Street Address (P.O. Box Number is Not Acceptable)			
CORAL GABLES FL 33134							
			City		FL Zip Code	э	
,	pration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! After September 12, 2		10. Election Campaign Trust Fund Contribu		O May Be	
<u> </u>	ria on back)	Make Check Payable		ADDITIONS/CHANGES TO O			
NAME	PSTD HICKS, RICHARD C 1189 EGRET CIRCLE SOUTH JUPITER FL 33458	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO O	Change	Addition	
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NAME 55 · · · · · · · · · · · · · · · · · ·		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		· Change	Addition	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
indicated	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo , or on an attachment with an address, w	true and accurate and that my	signature shall have the	e same legal effect as it made lings	er oath: that I am an officer	or airector i	

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

1/11/01

1-188-327-9397

Daytime Phone #