## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## FILED May 10, 2002 8:00 am Secretary of State

05-10-2002 90037 023 \*\*\*158.75

DOCUMENT # P93000021326  1. Entity Name						05-10-2002 90037 023 ***158.75					
Zook	Moore and Associate	s, Inc.		, ch	h/						
DO NOT WRITE IN THIS SPACE						851527					
2. Principal Place of Business 3. Mailing Address 901 Northpoint Parkway PO Box 33068				<u>"</u>				,			
Suite, Ap	t. #, etc.				DO NOT WRITE IN THIS SPACE						
Suite City & Sta	ate			<b>4</b> . F	4. FE! Number Applied For						
	est Palm Beach, FL Raleigh, NC. Zip Country Zip			*****		65-04	56689	_ <u>_</u>	Not Applicabl	le	
33407	USA	27636-3068	8 USA			ertificate of Status Desire		Fee Rec	Additional quired		
				Name _		ne and Address of Curr	ent Registe	red Agent			
DO NOT WRITE IN THIS SPACE				Roger R. Parenteau Street Address (P.O. Box Number is Not Acceptable) 901 Northpoint Parkway						_	
				Į.		int Parkway			<u>~</u>	_	
				Suite 406					A. 1		
8. The above named entity submits this statement for the purpose of changing its reg				West P	alm Be	each	F	L 334	07		
o. The above	a nomed entity adomics this attituent tot i	ne purpose of changing its	registere	ed office or regis	stered age	nt, or both, in the State o	f Florida.				
SIGNATURE	(No Change – jus	t restating w	hat i	is alrea	dy on	file.)					
0 75	· · · · · · · · · · · · · · · · · · ·	January 1 - M			uired when rein	rststing)	DATE			_	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  January 1 - May After May 1, Amended I Make Check Payable			1, Fee is I UBR is	s \$550.00 s \$61.25	State	10. Election Campaign Trust Fund Contrib	./	□ \$!	5.00 May Be ided to Fees		
11.	OFFICERS AND D									$\dashv$	
TITLE NAME	C/Sr.VP/T/S			l l		•				2/01)	
STREET ADDRESS CITY+ST-ZIP	Roger R. Parenteau 901 Nothpoint Parkway, Suite 406 West Palm Beach, FL 33407			I ADDRESS	* ما * -رواة إنسان يسر قالسان	The second secon			er er	CR2E034B (12/01)	
TITLE	West Palm Beach, FL D/P	33407	TITLE:	ST-ZIP 1 1 1	· Control of the cont	Parameter statement of the statement of	. ,		Topo 11 Top Ethiologia Soliti 12	E034	
NAME STREET ADDRESS	Richard W. Mercer				After surrent .	The Control of the Co				CR2	
CITY-S1-ZIP	The st women brave, burec 245			T'ADDRESS ST-ZIP							
TITLE	D/Exec. VP/Asst. S						<u></u>	<u></u>		1	
STREET ADDRESS	0001 = -			T ADORESS		the state of the s	e de la composição de l	ett 3 m, 10 .	18 1 2 2 4 4 1 1 1 1		
CITY-S1-ZIP				ST <sub>3</sub> ZIP		DO NOT	WR	ITE			
TITLE	VP/Asst. S				IN THIS SPACE						
NAME STREET ADDRESS	John M. Donaldson 901 Northpoint Parkway, Suite 406			TADDRESS		114 11110	Ol A		•		
CITY-ST-ZIP	West Palm Beach, FL 33407			ST-ZIP .	<u> </u>						
TITUE NAME	VP/Asst. S							-		1	
STREET ADDRESS	Jeffrey D. Armstrong			ADDRESS							
City-St-ZiP	Tampa, FL 33619 Ave., Suite 326			ST- ZIP							
TITLE NAME	VP/Asst. S				-					]	
Richard A. Ryabik 901 Northpoint Parkway, Suite 406				AODRESS		•					
CITY-ST-ZIP	West Palm Beach, FL 33407 ■ CHY-										
indicated of the con attachmen	ertify that the information supplied with thi on this report or supplemental report is tr poration or the receiver or trustee empow n with an address with all other like empo	s ming does not qualify for the and accurate and that me per to execute this report yerd.	he exem / signatu as requi	ption stated in S re shall have the red by Chapter	Section 119 e same leg 607, Florid	3.07(3)(i). Florida Statutes al effect as if made unde a Statutes; and that my r	i. I further ce r oath; that I iame appea	rtify that the am an offic rs in Block	e information ter or director 11 or on an		

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 4-24-02 <u> 561-6</u>83**-**4017