2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # $\overline{404543}$ 1. Entity Name ABEL, BAND RUSSELL, COLLIER, PITCHFORD & GORDON,

FILED May 12, 2001 8:00 am Secretary of State 05-12-2001 90009 034 ***150.00

Principal Plac	e of Business		Mailing Address										
Principal Place of Business 240 S PINEAPPLE AVE			PO BOX 49948										
10TH FLOOR			SARASOTA FL 34230-6948				A0064416						
SARASOTA FL	34236		US						H 4343	19 44 14	7.0		
US								1811 (1911) (1911				ANI AHAHI MANI	
2. Principal Place of Business			3. Mailing Address			_							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			_	DO NOT WRITE IN THIS SPACE						
City & State			City & State				4. FEI Number 50-1400144				I IA	pplied For	
only a chaic			0.5, 0.0.0.0			4. FEI Number 59-1409144					ot Applicable		
Zip	Country		Zip Co		untry		Certificate of S	Statue Daniro	٠ ٨ [\$	8.75 Ac	ditional	
				ļ.,						F	ee Requir		
	6. Name and Addres	s of Current Re	gistered Agent		• 1	7. 1	Name and Ad	dress of Ne	w Regis	tered Ag	gent		
001	LICE DOMALE				Name								
Collier, ronald 240 S. Pineapple			Street Address			s (P.O. E	(P.O. Box Number is Not Acceptable)						
	3. PINEAPPLE I FLOOR						· · · · · · · · · · · · · · · · · · ·						
	ASOTA FL 34236												
SANASOTA FL 34230				City					Zip Code				
8. The above	named entity submits thi	s statement for th	ne purpose of changing its	registere	d office or regist	ered ag	gent, or both, i	n the State o	f Florida.				
SIGNATURE _	Signature, typed or printed name		MOT	C. Ossistaras	A post signatura sagui	and unbook	ninstating)			DATE			
	Signature, typed or printed name	or registered agent and	title if applicable. (NO1)	E: Registered	Agent signature requi	rea when h	ellistaurig)			UNIL			
9. This corporation is eligible to satisfy its Intangible FILE NOW!!!					•		10. Election	n Campaign	n Financii	na	\$5.0)0 May Be	
•	requirement and elects to		After MAY 1, 20		•			und Contrib		ຶ 🗆		d to Fees	
(See criter	ria on back)		Make Check Payal		epartment of S								
11.		FICERS AND DI	***	12.		AC	DDITIONS/CH	ANGES TO	OFFICER				
THTLE	VD BONALD		☐ Delete	TITLE	l.					l	Change	☐ Addition	
NAME	COLLIER, RONALD I 240 S PINEAPPLE A			NAME	ET ADDRESS								
STREET ADDRESS CITY-ST-ZIP	SARASOTA FL	VE TUFL			ST-ZIP								
	VD VD			_							Change	Addition	
TITLE NAME	ABATE, ANTHONY J	Ī	☐ Delete	TITLE	l						Change	☐ ¥daltion	
STREET ADDRESS	240 S PINEAPPLE A				T ADDRESS								
CITY-ST-ZIP	SARASOTA FL	14C 101 E			ST-ZIP								
TITLE	PD		□ Delete	TITLE			· · · · · · · · · · · · · · · · · · ·				Change	Addition	
NAME	BAND, DAVID		□ Beletc	NAME	l					•	,	_	
STREET ADDRESS	240 S PINEAPPLE A	VE 10FL		STREE	ET ADDRESS								
CITY-ST-ZIP	SARASOTA FL			CITY-	ST-ZIP								
TITLE	VD		☐ Delete	TITLE							Change	Addition	
NAME	RUSSELL, JEFFREY			NAME									
STREET ADDRESS	240 S PINEAPPLE A	VE 10FL			T ADDRESS								
CITY-ST-ZIP	SARASOTA FL	•	MILLION TO THE STATE OF THE STA	CITY-	ST-ZIP								
TITLE	DST	1	☐ Delete	TITLE	i					ĺ	Change	☐ Addition	
NAME	GORDON, CHERYL I			NAME	.								
STREET ADDRESS CITY-ST-ZIP	240 S PINEAPPLE A	VE 1UFL			T ADDRESS ST-ZIP								
	SARASOTA FL VD			_									
TITLE NAME	PITCHFORD, MALCO	L M I	☐ Delete	TITLE	l l					L	Change	Addition	
STREET ADDRESS	240 S. PINEAPPLE A				T ADDRESS								
CITY-ST-ZIP	SARASOTA FL	NE IVIL			ST-ZIP								
OUT I STATE													
		supplied with th	is filing does not qualify for	r the exer		Section	119.07(3)(i) F	lorida Statuti	es. I furth	ner certif	v that the i	nformation	

SIGNATURE:

Cheryl L. Gordon, Director

4/16/01

(941) 366-6660

Daytime Phone #