

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 06, 2000 8:00 am**  
**Secretary of State**

03-06-2000 90091 035 \*\*\*150.00

**DOCUMENT # 500718**

1. Entity Name  
**EM MANAGEMENT, INC.**

Principal Place of Business      Mailing Address  
**200 S. ORANGE AVE. SUITE 2800**      **200 S. ORANGE AVE. SUITE 2800**  
**ORLANDO FL 32801**      **ORLANDO FL 32789-3173**

2. Principal Place of Business      3. Mailing Address  
**359 Carolina Ave.**      **359 Carolina Ave.**

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
**Winter Park, FL**      **Winter Park, Fl**

Zip      Country      Zip      Country  
**32789**      **USA**      **32789**      **USA**

4. FEI Number      Applied For  
**59-1690429**       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  
**ARIKO, JOHN G JR**  
**200 S ORANGE AVE, #2800**  
**ORLANDO FL 32801**

7. Name and Address of New Registered Agent  
 Name  
**Grant T. Downing**  
 Street Address (P.O. Box Number is Not Acceptable)  
**Godbold, Downing, Sheahan & Bill, P.A.**  
**222 West Comstock Ave. Suite 101**  
 City      State      Zip  
**Winter Park, FL 32789**

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 *Grant T. Downing* **GRANT T. DOWNING** VICE-PRES **2/11**  
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, 2000 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
PD	ARIKO, JOHN, JR.	200 S ORANGE AVE #2800	ORLANDO FL	<input checked="" type="checkbox"/>
S	SUGGS, ELISE	200 S ORANGE AVE, #2800	ORLANDO FL	<input type="checkbox"/>
DVP	PUGH, JAMES H.	359 CAROLINA AVE.	WINTER PARK FL	<input type="checkbox"/>
S	JACOBY, GREG	359 CAROLINA AVENUE	WINTER PARK FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	Pugh, Jr., James H.	359 Carolina Ave.	Winter Park, FL 32789	<input checked="" type="checkbox"/>	<input type="checkbox"/>
President	Jacoby, Greg	359 Carolina Ave.	Winter Park, Fl 32789	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Riva, Kyle	359 Carolina Ave.	Winter Park, Fl 32789	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vice President	Morgan, Kathy	359 Carolina Ave.	Winter Park, Fl 32789	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vice President	Relvini, Tricia	359 Carolina Ave.	Winter Park, FL 32789	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Suggs, Elise	359 Carolina Ave.	Winter Park, Fl 32789	<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: *[Signature]*      **2-23-2000**      Date      Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

168312-0000-0000