## 2002 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT# 693331**

Entity Name: THE WOODSMITHS COMPANY

FILED Jan 16, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** C/O TRIVEST, INC 2665 S. BAYSHORE DR., STE. 800 MIAMI, FL 33133 **Current Mailing Address: New Mailing Address:** C/O TRIVEST, INC 2665 S. BAYSHORE DR., STE. 800 MIAMI, FL 33133 US FEI Number: 59-2111678 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CALLEJAS, MARIA C 2665 SOUTH BAYSHORE DR. SUITE 800 MIAMI, FL 33133 US 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition BALDWIN, RAYNOR, BALDWIN, RAYNOR Name: Name: 2681 NE 4TH AVE 2681 NE 4TH AVE Address: Address: City-St-Zip: POMPANO BCH, FL City-St-Zip: POMPANO BCH, FL 33064 VΡ Title: Title: () Delete (X) Change ( ) Addition Name: STEINNERD, MARY Name: STEINNERD, MARY 2681 NE 4TH AVE 2681 NE 4TH AVE Address: Address: POMPANO BEACH, FL POMPANO BEACH, FL 33064 City-St-Zip: City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete DC TESNEY, BOBBY Name: Name: 160 VILLAGE STREET Address Address: City-St-Zip: City-St-Zip: BIRMINGHAM, AL 35242 Title: () Delete Title: ( ) Change (X) Addition TORTORICI, VINCENT A Name: Name: Address: Address: 160 VILLAGE STREET City-St-Zip: City-St-Zip: BIRMINGHAM, AL 35242 Title: Title: ( ) Change (X) Addition ( ) Delete ROSSER, DARRYL Name: Name: Address: 160 VILLAGE STREET Address: City-St-Zip: City-St-Zip: BIRMINGHAM, AL 35242 Title: () Delete Title: ( ) Change (X) Addition MARILYN, KUFFNER D Name: Name: 2665 SOUTH BAYSHORE DRIVE STE 800 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARILYN D. KUFFNER S 01/16/2002