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

DOCUMENT #

F01000001329

1. Entity Name



FILED Feb 11, 2004 8:00 am Secretary of State

02-11-2004 90035 027 ***150.00

Jodemann, The.										
	DO NOT WRITE	IN THIS SE	PAC	Έ:		9	40140	24		
2. Principal Pl 770 Re	ace of Business gency Reserve Cir	3. Mailing Address 770 Regency	Res	erve Cir						
Suite, Apt. #, etc. #1801		Suite, Apt. #, etc. #1801			DO NOT WRITE IN THIS SPACE					
City & State Naples, FL		City & State			4. FEI Number				Applied For	
Zip	Country	Naples, FL	Cour	ntry	43-052609 5. Certificate of Status			3.75 Ad		
34119	USA	<u> 34119 </u>	U	SA	7. Name and Address		— Fee	e Require	ed	
				Name Roger A. Beckermann						
DO NOT WRITE				-Street Address (P.O. Box Number is Not Acceptable)						
IN THIS SPACE				770 Regency Reserve Circle #1801						
				City Naple	- -		FL	Zip Cod		
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. I am familiar with, and accept the obligations of registered agent.										
ine obligati	ions of registered agent.									
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registere	ed Agent signature required	d when reinstating)		DATE			
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State					9. Election Ca Trust Fund	mpaign Fina Contribution.			00 May Be ed to Fees	
10.	OFFICERS AND		· 藤· · · ·	autor reconstruction in Sur	J			HEMMAN SHE	and the state of the state of	
TITLE 7	P/C/D		TITL	E •				More more		
STREET ADDRESS	Roger A. Beckermann 770 Regency Reserve Cir #1801			EET ADDRESS			r War Kara a Tana Kalika Tana a Tana Kalika Tana a Tana			
CITY-ST-ZÎP	Naples, FL 34119		CIT	/-ST-ZIP	And the second s					
TITLE NAME	V/S/D			E Æ						
STREET ADDRESS	Carol Lois Daniels 2455 Pine Wood Circle			EET ADDRESS						
CITY-ST-ZIP TITLE	Naples, Fl 34105			r-St-ZIP						
NAME	T/D		TITL NAA	SERVICE STREET						
STREET ADDRESS	Janet M. Laut 1186 Highway AA			EET ADDRESS	DO N	IOT I	NRIT	F		
CITY-ST-ZIP TITLE	Farmington, MO 63640			(-ST-ZIP E			entral and an area.	建位 隐 数		
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NAME			NAA	Æ						
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: 7 4. 15. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BECKERMUND ROGER A.

2/7/04

239-353-6931

CR2E034B (12/02)