## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## **FILED** May 19, 2002 8:00 am Secretary of State **DOCUMENT #** F98000002823 1. Entity Name VENCOR MARKETING, INC. 05-19-2002 90036 007 \*\*\*150.00 Principal Place of Business Mailing Address 1260 E OAKLAND PARK BLVD 1260 É OAKLAND PARK BLVD 963294 FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33334 US 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 Applied For 65-0759892 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FUHRMEISTER, J. CHRISTOPHER Street Address (P.O. Box Number is Not Acceptable) 1260 E OAKLAND PARK BLVD FT LAUDERDALE FL 33334 City Zip Code 8. The above named ep changing its registered office or registered agent, or both, in the State of Florida SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME 🧳 GALLANT, GLENN M NAME STREET AQORESS 5596 BAYVIEW DRIVE STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33308 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition BAETZ, DOUGLAS NAME NAME STREET ADDRESS 1101 CASA MARINA COURT STREET ADDRESS CITY-ST-ZIP KEY WEST FL 33040 CITY-ST-ZIP ☐ Delete ☐ · Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P 13. I hereby certify that the information supplied with this filing does not qualify for the elemption 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 anothrat 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 furties amplied to execute inspector as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment

Daytime Phone #