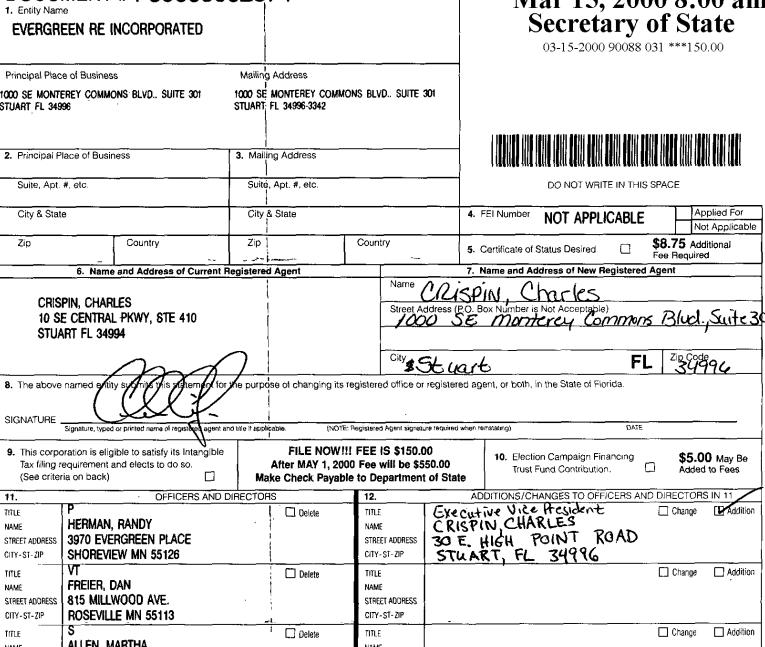
## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # F9900002374

## Principal Place of Business Mailing Address 1000 SÉ MONTEREY COMMONS BLVD., SUITE 301 1000 SE MONTEREY COMMONS BLVD., SUITE 301 STUART FL 34996 STUART: FL 34996-3342 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

## **FILED** Mar 15, 2000 8:00 am Secretary of State



* * *	011102107110					
TITLE	P	☐ Delete	TITLE	Executive Vice Acsident CRISPIN CHARLES	☐ Change	Addition
NAME	HERMAN, RANDY		NAME	CRISPIN CHARLES		
STREET ADDRESS	3970 EVERGREEN PLACE		STREET ADDRESS	30 E HIGH YOIN I KUND		
CITY-ST-ZIP	SHOREVIEW MN 55126		CITY-ST-ZIP	STUART, FL 34996		
TITLE	V	☐ Delete	TITLE		☐ Change	☐ Addition
NAME	FRÉIER, DAN		NAME			<i>'</i>
STREET ADDRESS	815 MILLWOOD AVE.		STREET ADDRESS			ł
CITY-ST-ZIP	ROSEVILLE MN 55113		CITY-ST-ZIP			
TITLE	S	☐ Delete	TITLE		☐ Change	☐ Addition
NAME	allen, martha		NAME			}
STREET ADDRESS	5193 ABERCROMBIE DR.		STREET ADDRESS			
CITY-ST-ZIP	EDINA MN 55439		CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		Change	☐ Addition
NAME			NAME			i
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		Change	☐ Addition
NAME			NAME			Ì
STREET ADDRESS	•		STREET ADDRESS			ì
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition
NAME			NAME			Ì
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information si indicated on this report or supplen of the corporation or the receiv changed, or on an attachment

SIGNATURE: