

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G66918

FILED  
Jan 10, 2002 8:00 AM  
Secretary of State

Entity Name: SINGHOFEN & ASSOCIATES, INC.

**Current Principal Place of Business:**

6961 UNIVERSITY BLVD  
WINTER PARK, FL 32792 US

**New Principal Place of Business:**

**Current Mailing Address:**

6961 UNIVERSITY BLVD  
WINTER PARK, FL 32792 US

**New Mailing Address:**

FEI Number: 59-2341111      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ICARDI, JEFFREY A.  
237 LOOKOUT PLACE  
MAITLAND, FL 32751 US

**Name and Address of New Registered Agent:**

ICARDI, JEFFREY A.  
237 LOOKOUT PLACE  
SUITE 100  
MAITLAND, FL 32751 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

01/10/2002

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so ( ).  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: T ( ) Delete  
Name: SINGHOFEN, ANNAMARIE, F  
Address: 6961 UNIVERSITY BLVD  
City-St-Zip: WINTER PARK, FL

Title: PVDS ( ) Delete  
Name: SINGHOFEN, PETER J.,  
Address: 6961 UNIVERSITY BLVD.  
City-St-Zip: WINTER PARK, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: V ( ) Change (X) Addition  
Name: GAYLORD, ROBERT B V  
Address: 6961 UNIVERSITY BLVD  
City-St-Zip: WINTER PARK, FL 32792 US

Title: T (X) Change ( ) Addition  
Name: SINGHOFEN, ANNAMARIE F T  
Address: 6961 UNIVERSITY BLVD  
City-St-Zip: WINTER PARK, FL 32792 OS

Title: PDS (X) Change ( ) Addition  
Name: SINGHOFEN, PETER J P/D/S  
Address: 6961 UNIVERSITY BLVD.  
City-St-Zip: WINTER PARK, FL 32792 US

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: ANNAMARIE F. SINGHOFEN

Electronic Signature of Signing Officer or Director

T

01/10/2002

Date