2002 UNIFORM BUSINESS REPORT (UBR)

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

DOCUMENT# H53164

Entity Name: CANDY SWICK, P.A.

Current Principal Place of Business:

500 JOHN RINGLING BLVD.
SARASOTA, FL 34236 US

New Principal Place of Business:

100 N WASHINGTON BV
SUITE 102
SARASOTA, FL 34236 US

Current Mailing Address:

100 N WASHINGTON BV
SUITE 102
SARASOTA, FL 34236 US

New Mailing Address:

FEI Number: 59-2523771 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWICK, JAY A.
7661 COVE TERR
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

SWICK, JAY A
7661 COVE TERR
SARASOTA, FL 34231 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: JAY A SWICK 01/16/2002
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:

Title: PD ( ) Delete
Name: SWICK, CORNELIA S.,
Address: 7661 COVE TERR
City-St-Zip: SARASOTA, FL

Title: VST ( ) Delete
Name: SWICK, CORNELIA S.,
Address: 7661 COVE TERR
City-St-Zip: SARASOTA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SWICK, CORNELIA S
Address: 7661 COVE TERR
City-St-Zip: SARASOTA, FL 34231

Title: VST (X) Change ( ) Addition
Name: SWICK, CORNELIA S
Address: 7661 COVE TERR
City-St-Zip: SARASOTA, FL 34231

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: CORNELIA S. SWICK PD 01/16/2002
Electronic Signature of Signing Officer or Director Date