## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J36846

Entity Name: SOUTHERN AUCTIONEERS OF AMERICA, INC.

Apr 29, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

% ROBERT J. LOWE % ROBERT J. LOWE 4949 NORTH A1A, #131 4949 NORTH A1A, #131 FT. PIERCE, FL 34949 FT. PIERCE, FL 34949 US

**Current Mailing Address:** New Mailing Address:

% ROBERT J. LOWE % ROBERT J. LOWE 4949 NORTH A1A, #131 4949 NORTH A1A, #131 FT. PIERCE, FL 34949 FT. PIERCE, FL 34949 US

FEI Number: 59-3214764 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LOWE, ROBERT J. 4949 NORTH A1A #131

Title:

Name:

Address:

City-St-Zip:

FT. PIERCE, FL 349498826 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 Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

Title:

() Delete (X) Change ( ) Addition LOWE, ROBERT J LOWE, ROBERT J Name: 4949 NORTH A1A, #131 4949 NORTH A1A, #131 Address: FT. PIERCE, FL 34949 City-St-Zip: FT. PIERCE, FL 34949 US

( ) Delete Title: STD Title: STD (X) Change ( ) Addition Name:

LOWE, SHARON, Name: LOWE, SHARON, 4949 NORTH A1A, #131 Address: 4949 NORTH A1A, #131 Address: FT. PIERCE, FL FT. PIERCE, FL 34949 US City-St-Zip: City-St-Zip:

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: ROBERT J LOWE PV 04/29/2002