

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02589

FILED  
Apr 17, 2002 8:00 AM  
Secretary of State

Entity Name: ANDREW HARRIS REALTY CORP.

## Current Principal Place of Business:

20365 MONTEVERDI CIR.  
BOCA RATON, FL 33498 US

## New Principal Place of Business:

7012 TORREY PINES CIRCLE  
PORT ST. LUCIE, FL 34986 US

## Current Mailing Address:

20365 MONTEVERDI CIR  
BOCA RATON, FL 33498 US

## New Mailing Address:

7012 TORREY PINES CIRCLE  
PORT ST. LUCIE, FL 34986 US

FEI Number: 65-0130928

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHLOSSER, GERALD  
20365 MONTEVERDI CIR  
BOCA RATON, FL 33498 US

## Name and Address of New Registered Agent:

SCHLOSSER, GERALD  
7012 TORREY PINES CIRCLE  
PORT ST. LUCIE, FL 34986 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:

04/17/2002

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: DVP ( ) Delete  
Name: SCHLOSSER, GERALD,  
Address: 20365 MONTEVERDI CIRCLE  
City-St-Zip: BOCA RATON, FL

Title: DP ( ) Delete  
Name: SCHLOSSER, RENEE,  
Address: 20365 MONTEVERDI CIRCLE  
City-St-Zip: BOCA RATON, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition  
Name: SCHLOSSER, GERALD,  
Address: 7012 TORREY PINES CIRCLE  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: DP (X) Change ( ) Addition  
Name: SCHLOSSER, RENEE,  
Address: 7012 TORREY PINES CIRCLE  
City-St-Zip: PORT ST. LUCIE, FL 34986

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: GERALD SCHLOSSER

VP

04/17/2002

Electronic Signature of Signing Officer or Director

Date