

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L67273

FILED  
May 03, 2002 8:00 AM  
Secretary of State

**Entity Name:** TOP MANAGEMENT OF SOUTHWEST FLORIDA, INC.

## Current Principal Place of Business:

16681 MCGREGOR BLVD  
SUITE 207  
FT MYERS, FL 33908 US

## New Principal Place of Business:

16681 MCGREGOR BLVD  
SUITE 104  
FT MYERS, FL 33908 US

## Current Mailing Address:

16681 MCGREGOR BLVD  
SUITE 207  
FT MYERS, FL 33908 US

## New Mailing Address:

16681 MCGREGOR BLVD  
SUITE 104  
FT MYERS, FL 33908 US

**FEI Number:** 65-0184592

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## Name and Address of Current Registered Agent:

DILLER, BEATRICE E.  
16681 MCGREGOR BLVD SUITE 207  
SUITE F  
FT MYERS, FL 33908 US

## Name and Address of New Registered Agent:

DILLER, BEATRICE E.  
16681 MCGREGOR BLVD  
SUITE 104  
FT MYERS, FL 33908 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:

05/03/2002

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: PDST ( ) Delete  
Name: DILLER, BEATRICE E.  
Address: 15167 IONA LAKES DR  
City-St-Zip: FT MYERS, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change ( ) Addition  
Name: DILLER, BEATRICE E.  
Address: 6919 KIMBERLY TERRACE  
City-St-Zip: FT MYERS, FL 33919

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: BEATRICE E. DILLER

PDST

05/03/2002

Electronic Signature of Signing Officer or Director

Date