

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L97000000995

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: AMERICAN SUPERIOR MANAGEMENT COMPANY, L.C.

Current Principal Place of Business:

600 N. PINE ISLAND ROAD, SUITE 400
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

600 N. PINE ISLAND ROAD, SUITE 400
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 65-0788806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, WILLIAM B
215 S. MONROE ST., STE 600
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: LATTI, WILLIAM S
Address: 600 N PINE ISLAND RD
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: RENFRO, TIM A SR
Address: 600 N PINE ISLAND RD
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: VAN METER, WILLIAM
Address: 600 N PINE ISLAND RD
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: HUDSON, GREG
Address: 230 GREG HUDSON DR
City-St-Zip: PROVIDENCE, KY 42420

Title: MGR () Delete
Name: DUER, RICHARD
Address: 600 N PINE ISLAND RD
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: BERTA, VINCE A
Address: 987 ELMWOOD CT
City-St-Zip: BOWLING GREEN, KY 42103

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TIM A. RENFRO

MGR

04/29/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date