

2002 UNIFORM BUSINESS REPORT (UBR)

0024300

DOCUMENT # N99000004305

1. Entity Name

THE MEYER GROUP INCORPORATED

FILED

02 JUN 14 PM 1:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

325 FERNWOOD ROAD
VILLA-12
KEY BISCAINE FL 33149
US

325 FERNWOOD ROAD
VILLA-12
KEY BISCAINE FL 33149
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0935730

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MEYER, MARK
325 FERNWOOD ROAD
VILLA-12
KEY BISCAINE FL 33149

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME MEYER, DAVID
STREET ADDRESS 4917 WEST 114TH STREET
CITY-ST-ZIP BLOOMINGTON MN 55437

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS 700006109597--5
CITY-ST-ZIP -06/28/02--01067--016
*****61.25 *****61.25

TITLE ☐ Delete
NAME MEYER, MARK
STREET ADDRESS 230 HAMPTON LANE
CITY-ST-ZIP KEY BISCAINE FL 33149

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ Delete
NAME MCGARRY, SEAMUS
STREET ADDRESS 575-706 CRANDON BLVD.
CITY-ST-ZIP KEY BISCAINE FL 33149

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ Delete
NAME HILLMAN, BETH A
STREET ADDRESS 7400 S.W. 63RD COURT
CITY-ST-ZIP SOUTH MIAMI FL 33134

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V ☐ Delete
NAME JACKSON, JOSEPHINE L
STREET ADDRESS 13C SAINT JOHN'S ROAD, LONDON, EDGLAND
CITY-ST-ZIP UNITED KINGDOM SE20-7EF

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S ☐ Delete
NAME BESSOCKE, DAWN L
STREET ADDRESS 87 YEW LANE
CITY-ST-ZIP BAILEY CO 80421

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

14 June 2002 561-222-3398

CR2E037 (9/01)