2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000004771

Entity Name: FLORIDA COMMERCIAL SPACE FINANCING CORPORATION

FILED Jan 14, 2002 8:00 AM Secretary of State

1311 NORTH U.S. HWY 1 SUITE 129 TITUSVILLE, FL 32796	Current Pr	incipal Place o		New Principal Place of Business:					
1311 NORTH U.S. HWY 1 SUITE 129	SUITE 129								
SUITE 129	Current Mailing Address:				New Mailing Address:				
Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DOVE, JOYCE S 203 N GADSDEN ST SUITE 37 TALLAHASSEE, FL 32301 THOMPSON, PHILIP R 1311 NORTH U.S. 1 SUITE 129 TTIUSVILLE, FL 32796 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bo in the State of Florida. TITUSVILLE, FL 32796 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bo in the State of Florida. 0 1/14/2002 SIGNATURE: PHILIP R. THOMPSON 01/14/2002 SIGNATURE: PHILIP R. THOMPSON 01/14/2002 OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: D () Delete Name: WALKER, SUSAN Name: Name: WALKER, SUSAN Name: Address: 50 NORTH LAURA STREET Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: Title: D () Delete Name: Name: MOORE, GREG Name: () Change () Addition Name: MORANOE, AVE-STE 1300 City-St-Zip: TALLAHASSEE, FL 32330	SUITE 129								
DOVE, JOYCE S 203 N GADSDEN ST 311 NORTH U.S. 1 SUITE 3 SUITE 3 SUITE 3 SUITE 129 TITUSVILLE, FL 32796	FEI Number:	59-3624635	FEI Number Applied For ()	FEI Num	ber Not Appli	cable ()	Certificate	e of Status Des	ired ()
1311 NORTH U.S. 1 SUITE 129	Name and	Address of Cu		Name and Address of New Registered Agent:					
In the State of Florida . SIGNATURE:	203 N GAD SUITE 3	SDEN ST		1311 NORTH U.S. 1 SUITE 129					
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: D () Delete Name: WALKER, SUSAN Address: 50 NORTH LAURA STREET City-St-Zip: JACKSONVILLE, FL 32202 Title: D () Delete Title: D () Change () Addition Name: HORTON, JOHN W Address: 390 N. ORANGE AVE-STE 1300 Address: 390 N. ORANGE AVE-STE 1300 Address: OTLANDO, FL 32801 Title: D () Delete Title: D () Change () Addition Name: HORTON, JOHN W Address: City-St-Zip: TALLAHASSEE, FL 32301 Title: D () Delete Title: () Change () Addition Name: Address: City-St-Zip: TALLAHASSEE, FL 323990450 Title: DP () Delete Title: OD (X) Change () Addition Name: TOLLEY, JAMES Address: 195 CHICORY AVENUE NW City-St-Zip: PLANTATION, FL 33317 City-St-Zip: PLANTATION, FL 33317 City-St-Zip: Title: D () Change () Addition Name: Name: KOCOUREK, TODD G Name: Address: 1242 NORTH DUVAL STREET Address: 2001 THE CAPITOL Address: 2001 THE CAPITOL Address: 2001 THE CAPITOL Address: 2001 THE CAPITOL Address:	The above in the State	named entity su of Florida.	ubmits this statement for the pur	rpose of	changing it	s registered	d office or re	gistered ager	nt, or both,
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: D () Delete Title: () Change () Addition Name: WALKER, SUSAN Name: Address: City-St-Zip: D (X) Change () Addition Address: 50 NORTH LAURA STREET Address: City-St-Zip: D (X) Change () Addition Name: MORRISON/ILLE, FL 32202 Title: D (X) Change () Addition Name: MORRE, GREG Name: HORTON, JOHN W Address: 390 N. ORANGE AVE-STE 1300 Address: 215 SOUTH MONORE STREET City-St-Zip: ORLANDO, FL 32801 Title: () Change () Addition Name: DUNCAN, TOM Name: () Change () Addition Name: DUNCAN, TOM Address: OITY-St-Zip: Title: DP () Delete Title: D (X) Change () Addition Name: MORRIS, RON Name: TOLLEY, JAMES Address: 499 NW 70TH AVE-STE 110 Address: 195 CHICORY AVENUE NW City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: () Chang	SIGNATUR	E: PHILIP R.				01	/14/2002		
Title:		Electronic	Signature of Registered Agent	t				ate	
Name: WALKER, SUSAN Name: Address: 50 NORTH LAURA STREET Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: Title: D () Delete Title: D (X) Change () Addition Name: MOORE, GREG Name: HORTON, JOHN W Address: 390 N. ORANGE AVE-STE 1300 Address: 215 SOUTH MONORE STREET City-St-Zip: ORLANDO, FL 32801 City-St-Zip: TALLAHASSEE, FL 32301 Title: D () Delete Title: () Change () Addition Name: DUNCAN, TOM Name: Address: 605 SUWANNEE STREET MS-46 Address: City-St-Zip: TALLAHASSEE, FL 323990450 City-St-Zip: Title: DP () Delete Title: D (X) Change () Addition Name: MORRIS, RON Name: TOLLEY, JAMES Address: 499 NW 70TH AVE-STE 110 Address: 195 CHICORY AVENUE NW City-St-Zip: PLANTATION, FL 33317 City-St-Zip: PALM BAY, FL 32907 Title: D () Delete Title: () Change () Addition Name: Address: City-St-Zi	OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
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Name: MORRIS, RON Name: TOLLEY, JAMES Address: 499 NW 70TH AVE-STE 110 Address: 195 CHICORY AVENUE NW City-St-Zip: PLANTATION, FL 33317 City-St-Zip: PALM BAY, FL 32907 Title: D () Delete Title: () Change () Addition Name: KOCOUREK, TODD G Name: Address: 1242 NORTH DUVAL STREET Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: Title: D () Delete Title: () Change () Addition Name: BLAKESLEE, MARY HELEN Name: Address: 2001 THE CAPITOL Address:	Name: Address:	DUNCAN, TOM 605 SUWANNEE	STREET MS-46		Name: Address:		() Change () Addition	
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Name:BLAKESLEE, MARY HELENName:Address:2001 THE CAPITOLAddress:	Name: Address:	KOCOUREK, TO 1242 NORTH DU	DD G VAL STREET		Name: Address:		() Change () Addition	
	Name: Address:	BLAKESLEE, MA 2001 THE CAPIT	ARY HELEN OL		Name: Address:		() Change () Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN WILEY HORTON D 01/14/2002

WILLIAM POSEY, DIRECTOR 1082 SOUTH FISKE BLVD. SUITE 108 ROCKLEDGE, FL 32955