

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91351 040 ***150.00

DOCUMENT # P00000002293

1. Entity Name
MEYER MANAGEMENT GROUP, INC.

Principal Place of Business: **1021 S.E. 12TH COURT CAPE CORAL FL 33990**
 Mailing Address: **1021 S.E. 12TH COURT CAPE CORAL FL 33990**

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.
 City & State
 Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number: **65-0984697**
 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MEYER, BARBARA E
1021 S.E. 12TH COURT
CAPE CORAL FL 33990

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. The above report entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See instructions on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
P MEYER, DAVID I 5301 MAJESTIC COURT CAPE CORAL FL 33904	<input type="checkbox"/> Delete
VP MEYER, TRISTAN 5301 MAJESTIC COURT CAPE CORAL FL 33904	<input type="checkbox"/> Delete
S MEYER, BARBARA E 5301 MAJESTIC COURT CAPE CORAL FL 33904	<input type="checkbox"/> Delete
T MEYER, BARBARA E 5301 MAJESTIC COURT CAPE CORAL FL 33904	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. The filer certifies 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 supplied in this 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 this corporation and that my name appears on the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if appropriate, or in both, with an address with all other like empowered.

SIGNATURE: *Barbara Meyer* **Barbara Meyer**

4/30/02 239-574-1265

CR2E034 (10/00)