

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90376 046 ***150.00

DOCUMENT # P00000110538



1. Entity Name
33 MANSELL GP, INC.

Principal Place of Business
**300 SE 2ND STREET
FT LAUDERDALE FL 33301**

Mailing Address
**300 SE 2ND STREET
FT LAUDERDALE FL 33301**

10079455



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1074406**

Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JONES, PATRICIA
300 SE 2ND ST
FT LAUDERDALE FL 33301**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input type="checkbox"/> Delete
NAME	STILES, TERRY	
STREET ADDRESS	300 SE 2ND ST	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	VT	<input type="checkbox"/> Delete
NAME	EAGON, DOUGLAS P	
STREET ADDRESS	300 SE 2ND STREET	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	
TITLE	VS	<input type="checkbox"/> Delete
NAME	JONES, PATRICIA	
STREET ADDRESS	300 SE 2ND ST	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	V	<input type="checkbox"/> Delete
NAME	FERRERA, ROCCO	
STREET ADDRESS	300 SE 2ND ST	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	V	<input type="checkbox"/> Delete
NAME	STINE, JAMES W	
STREET ADDRESS	300 SE 2ND ST	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	V	<input type="checkbox"/> Delete
NAME	O'SHEA, DENNIA F	
STREET ADDRESS	300 SE 2ND ST	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 607, 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/15/03 Daytime Phone #: 954-627-9300

CR2E034 (10/02)

ATTACHMENT

10079455

P00000110538

UNIFORM BUSINESS REPORT

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE:	V	Addition
NAME:	PALMER, STEPHEN R.	
STREET ADDRESS:	300 SE 2 nd St.	
CITY-ST-ZIP:	Ft. Lauderdale, FL 33301	