

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000072623

FILED
Mar 05, 2002 8:00 AM
Secretary of State

Entity Name: ADVANCED RESIDENTIAL MARKETING INC

Current Principal Place of Business:

1101 N CONGRESS AVENUE
SUITE #201
BOYNTON BEACH, FL 33426

New Principal Place of Business:

575 NW 45TH DRIVE
DELRAY BEACH, FL 33445

Current Mailing Address:

1101 N CONGRESS AVENUE
SUITE #201
BOYNTON BEACH, FL 33426

New Mailing Address:

575 NW 45TH DRIVE
DELRAY BEACH, FL 33445

FEI Number: 65-1122175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOMINY, KENOL
1101 N CONGRESS AVENUE
SUITE #201
BOYNTON BEACH, FL 33426

Name and Address of New Registered Agent:

LOMINY, KENOL
575 NW 45TH DRIVE
DELRAY BEACH, FL 33445

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: KENOL LOMINY

03/05/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOMINY, KENOL
Address: 1101 N CONGRESS AVENUE, SUITE #201
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VD () Delete
Name: WATSON, MICHAEL A
Address: 1101 N CONGRESS AVENUE, SUITE #201
City-St-Zip: BOYNTON BEACH, FL 33426

Title: STD (X) Delete
Name: LOMINY, MARIE B
Address: 1101 N CONGRESS AVENUE, SUITE #201
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOMINY, KENOL
Address: 575 NW 45TH DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

Title: VD (X) Change () Addition
Name: LOMINY, MARIE
Address: 575 NW 45TH DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

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

SIGNATURE: KENOL LOMINY

P

03/05/2002

Electronic Signature of Signing Officer or Director

Date