

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 16, 2003 8:00 am
Secretary of State

06-16-2003 90148 007 ***550.00

DOCUMENT # P01000098011

1. Entity Name
FERGUSON FINANCIAL GROUP, INC.



Principal Place of Business
**1526 REYNARD RD.
FT. MEYERS FL 33919**

Mailing Address
**1526 REYNARD RD.
FT. MEYERS FL 33919**

2. Principal Place of Business

4134 OLDE MEADOWBROOK LN.

3. Mailing Address

4134 OLDE MEADOWBROOK LN.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BONITA SPRINGS FL

City & State

BONITA SPRINGS FL

Zip

34134

Country

USA

Zip

34134

Country

USA

4. FEI Number

65-1154128

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TERRIACO, EUGENE
1525 REYNARD RD.
FT. MEYERS FL 33919**

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 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 **EUGENE TERRIACO**

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

(NOTE: Registered Agent signature required when reinstating)

6-10-03

DATE

**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

TITLE **PD** ☐ Delete
NAME **FERGUSON, C. DAVID**
STREET ADDRESS **10602 MAJESTY LANE** **4134 OLDE MEADOWBROOK LN.**
CITY-ST-ZIP **CONCORD OH 44077** **BONITA SPRINGS, FL 34134**

TITLE **VTSD** ☐ Delete
NAME **FERGUSON, KATHLEEN**
STREET ADDRESS **10602 MAJESTY LANE** **4134 OLDE MEADOWBROOK LN.**
CITY-ST-ZIP **CONCORD OH 44077** **BONITA SPRINGS, FL 34134**

TITLE **VSD** ☐ Delete
NAME **DUNN, STEVEN J**
STREET ADDRESS **7400 DAISY'S WOOD LANE**
CITY-ST-ZIP **GATES MILLS OH 44040**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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TITLE ☐ Change ☐ 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 REQUIRED

6-10-03

Date

Daytime Phone #

CR2E034 (10/02)