

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000114721

FILED
Feb 18, 2002 8:00 AM
Secretary of State

Entity Name: TOF CONSULTANTS, INC.

Current Principal Place of Business:

5101 S.E. MEADOW SPGS. BLVD.
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

5101 S.E. MEADOW SPGS. BLVD.
STUART, FL 34997

New Mailing Address:

FEI Number: 65-1157866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAILY, GERALD W
146 SANDBAR DRIVE
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

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:

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: P () Delete
Name: DAILY, GERALD W
Address: 146 SANDBAR DR.
City-St-Zip: JUPITER, FL 33477

Title: V () Delete
Name: MORSE, MICHAEL W
Address: 10490 TRAILWOOD CIR.
City-St-Zip: JUPITER, FL 33478

Title: ST () Delete
Name: STONE, MICHAEL D
Address: 5101 S.E. MEADOW SPGS. BLVD.
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL D. STONE

ST

02/18/2002

Electronic Signature of Signing Officer or Director

Date