

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90151 037 ***150.00

DOCUMENT # P02000013894

1. Entity Name
LANDMARK ASSET MANAGEMENT CORPORATION



Principal Place of Business
5481 COVE CIR
NAPLES, FL 34119

Mailing Address
5481 COVE CIR
NAPLES, FL 34119

90065714



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
4380 Gulf Shore Blvd. North
Suite, Apt. #, etc.
Suite 806

3. Mailing Address
4380 Gulf Shore Blvd. North
Suite, Apt. #, etc.
Suite 806

City & State
Naples, FL

City & State
Naples, FL

4. FEI Number
01-0593660

Applied For
Not Applicable

Zip
34103

Country
USA

Zip
34103

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HELWEG, MARK W
5481 COVE CIR
NAPLES, FL 34119

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

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

(NOTE: Registered Agent signature required when registering)

DATE

FILED NEW!!! FEE IS \$150.00
APRIL MAY 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
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
D/P/S/T
Mark W. Helweg
5481 Cove Circle
Naples, FL 34119

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
D/V
David C. Stendahl
4380 Gulf Shore Blvd. North, Suite 806
Naples, FL 34103

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
D/V
Gary L. Knutsen
4380 Gulf Shore Blvd. North, Suite 806
Naples, FL 34103

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

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

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

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:

Mark W. Helweg, President

3/11/03

(239) 262-6077

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Display Phone #

CR2EC34 (10/02)