


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90346 003 ***150.00

PROFIT CORPORATION ANNUAL REPORT 2001		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # P12813

1. Corporation Name

VERCOR AND ASSOCIATES, INC.

Principal Place of Business

9853 TAMAMI TRAIL N
SUITE 101
NAPLES FL 33963
US

Mailing Address

31313 NORTH WESTERN HWY., #219
FARMINGTON HILLS MI 48334
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 257 JOHNNYCAKE DRIVE Suite, Apt. #, etc. 22 City & State 23 NAPLES, FL Zip 24 34110	2a. Mailing Address 26 31313 NORTHWESTERN HWY. Suite, Apt. #, etc. 27 # 212 City & State 28 FARMINGTON HILLS MI Zip 29 48334	3. Date Incorporated or Qualified 12/30/1986 4. FEI Number 38-2640506 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	---	---

9. Name and Address of Current Registered Agent VERROT, BRAD 190 5TH STREET BONITA SPRINGS FL 33923	10. Name and Address of New Registered Agent 81 Name VERROT BRAD 82 Street Address (P.O. Box Number is Not Acceptable) 257 JOHNNYCAKE DRIVE 83 84 City NAPLES FL 85 Zip Code 34110
--	---

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Brad Verrot BRAD VERROT DATE 4-30-2001

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE P NAME VERROT, R. BRUCE STREET ADDRESS 1357 CHURCHILL CR,G-101 CITY-ST-ZIP NAPLES FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE T NAME VERROT, JOHN STREET ADDRESS 1442 WILDWOOD LKS CITY-ST-ZIP NAPLES FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE S NAME VERROT, BRAD STREET ADDRESS 190 5TH STREET CITY-ST-ZIP BONITA SPRGS FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE VP NAME VERROT, MARY STREET ADDRESS 1357 CHURCHILL CR,G-101 CITY-ST-ZIP NAPLES FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Brad Verrot BRAD VERROT DATE 4-30-2001

CR2E034 (11/98)