DOCUN	UNIFORM BUS MENT # P93000 D K-M SEBASTIAN, FL., IN	032366 μ		(UBR)		FIL Apr 27, 20 Secretary 04-27-2001 9037	01 8:00 / of Sta	
Principal Place of Business 3355 US HWY #1 EBASTIAN FL 32958 S 2. Principal Place of Business		Mailing Address 933 MACARTHUR BLVD MAHWAH NJ 07430 US				v		
		3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State	City & State			4. FEI Number 22-3235557 Applied For Not Applied For		
Zip	Country	Zip	Coun	try	5. Certifi	cate of Status Desired	\$8.75 Addi Fee Required	tional
	6. Name and Address of Curre	nt Registered Agent		Name	7. Name	and Address of New Registe	red Agent	
	ED STATES CORPORATION CO HAYES ST	MPANY	ANY		ss (P.O. Box Number is Not Acceptable)			
suite Tall/	E 105 AHASSEE FL 32301				توا Zip Code			
0	equirement and elects to do so. (a on back)	_ /	After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of S DIRECTORS			I FUSI FUND CONTIDUION I L Added to Fees		
TITLE NAME STREET ADORESS CITY - ST - ZIP	PD SHEPARD, JEFFREY 933 MACARTHUR BLVD MAHWAH NJ	Delete	: TITL NAM STR	Æ			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Delete PROFFITT, RANDALL S 933 MACARTHUR BLVD MAHWAH NJ						🗌 Change	🔲 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT Delete GUINNESSEY, KATHLEEN 933 MACARTHUR BLVD MAHWAH NJ 07430			le Me Reet Address Y-ST-Zip			Change	Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AT BAUMLIN, THOMAS 933 MACARTHUR BLVD MAHWAH NJ 07430	Delete	NA! STF				Change	🔲 Adaition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PALIZZI, ANTHONY 3100 W BIG BEAVER TROY MI	Delete	NAI STF	1			🗌 Change	🔲 Addit:on
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RICHARDS, MAUREEN 933 MAC ARTHUR BLVD MAHWAH NJ		NAI				🛄 Change	Addition.
13. I hereby indicated	certify that the information supplied d on this report or supplemental report proration or the receiver or trustee e	with this filing does not qua ort is true and accurate and	aiify for the ex I that my sign	emption stated in ature shall have	n Section 119 the same lega	.07(3)(i), Florida Statutes. I furth al effect as if made under oath:	ner certify that the i that 1 am an office	nformation
of the co changed	prooration or the receiver or trustee e d, or on an attachment with an addre	empowered to execute this ass, with all other like empo-	wered.	uired by Chapter		Statutes; and that my name app APR 1 6 2001	cears in Block 11 c (201) 934	