

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2002 8:00 am**  
**Secretary of State**

04-23-2002 90381 017 \*\*\*150.00

**DOCUMENT # P93000042398**

1. Entity Name  
**EURO AMERICAN ADVISORS, INC.**

Principal Place of Business <b>C/O EURO AMERICAN MANAGEMENT, INC.          4350 WEST CYPRESS STREET, SUITE 250          TAMPA FL 33607          US</b>	Mailing Address <b>4350 W CYPRESS STREET, STE 250          SUITE 250          TAMPA FL 33607          US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business St <b>4300 W. Cypress Street          Suite 1075          Tampa, FL 33607</b>	3. Mailing Address <b>4300 W. Cypress Street          Suite 1075          Tampa, FL 33607</b>
Zip <b>33607</b>	Country <b>US</b>

4. FEI Number <b>65-0428436</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  
**AMEURCO MANAGEMENT INC  
 4350 W CYPRESS STREET  
 TAMPA FL 33607**

7. Name and Address of New Registered Agent  
 Name  
**4300 W. Cypress Street, Suite 1075  
 Tampa, FL 33607**

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.  
**BRUCE D. BURDGE**  
**EXECUTIVE VICE PRESIDENT** **APR 4 2002**  
 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See Criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P BESSEM, HERMAN 4350 W CYPRESS STREET, STE 250 TAMPA FL 33607</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>EVP BURDGE, BRUCE D 4350 W CYPRESS STREET STE 250 TAMPA FL 33607</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T SHOWALTER, KRISTEN K 4350 W CYPRESS ST SUITE 250 TAMPA FL 33607</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S BOMBEECK, FRANK 4350 W CYPRESS ST, SUITE 250 TAMPA FL 33607</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>4300 W. Cypress Street Suite 1075 Tampa, FL 33607</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>4300 W. Cypress Street Suite 1075 Tampa, FL 33607</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>4300 W. Cypress Street Suite 1075 Tampa, FL 33607</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 200 Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_ **BRUCE D. BURDGE**  
**EXECUTIVE VICE PRESIDENT** **APR 4 2002** **813-353-8800**  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/01)