| 2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P93000053401 | | | | \neg | FILED Aug 27, 2002 8:00 am Secretary of State | |
|--|--|--|---|--|--|--|
| J. ANTHONY & ASSOCIATES OF FLORIDA, INC. | | | | \wedge | 08-27-2002 90117 019 ***150.00 | |
| Principal Place of Business 500 MAITLAND AVE. SUITE 103 MAITLAND FL 32751 US | | Mailing Address 500 MAITLAND AVE. SUITE 103 MAITLAND FL 32751 US | | | DO NOT WRITE IN THIS SPACE | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | 3. Mailing Address 270 DAVIDSON AVE Suite, Apt. #, etc. | | | | |
| City & State | | SUITE 107 City & State | | 4. | | |
| Zip | Country | SOMERSET DER 73 | Country | _ | Certificate of Status Desired Status | |
| 6 | Name and Address of Current Re | | | | Name and Address of New Registered Agent | |
| BARONE, SANDRA 500 N. MAITLAND AVE. SUITE 103 | | | Street Address | | | |
| MAITLAND FL | | | City | | FL Zip Code | |
| The above name the obligations of | ed entity submits this statement for the of registered agent. | he purpose of changing its r | egistered office or regist | ered ag | ent, or both, in the State of Florida. I am familiar with, and accept | |
| | ture, typed or printed name of registered agent and | title if applicable. (NOTE: | Registered Agent signature requir | ed when re | sinstating) DATE | |
| Tax filing requirement and elects to do so. After September 13, 2 | | | FEE IS \$550.00 2002 Fee will be \$75 to Department of St | FEE IS \$550.00 D02 Fee will be \$750.00 to Department of State10. Election Campaign Financing Trust Fund Contribution.\$5.00 May Be Added to Fees | | |
| 11. ITLE D | OFFICERS AND DI | RECTORS | 12. TITLE | AD | DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| AAME BAI | Rone, Sandra Coventry Way Pewell NJ 08525 | | NAME STREET ADDRESS CITY-ST-ZIP | | Change Addition | |
| ITLE IAME TREET ADDRESS ITY-ST-ZIP | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ,,, | Change Addition | |
| TLEAME | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Change _ Change _ Addition | |
| TLE Ame Ireet address TY - ST - ZIP | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Change Addition | |
| ile Ime Reet address Ty-st-zip | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Change Addition | |
| LE ME REET ADDRESS Y - ST - ZIP | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Change Addition | |
| of the corporatio | an or the receiver or trustee empower an attachment with an address, with E: | red to execute this report of | | same le 7, Florid | 19.07(3)(i), Florida Statutes. I further certify that the information egal effect as if made under oath; that I am an officer or director la Statutes; and that my name appears in Block 11 or Block 12 if | |

attackment

J. ANTHONY & ASSOCIATES, INC.

270 Davidson Avenue Suite 107 Somerset, New Jersey 08873-4140 Tel #: 732-560-8275 Fax #: 732-560-0918

500 North Maitland Avenue Suite 103 Maitland, Florida 32751 Tel #: 407-647-7768 Fax #: 407-647-7902

725 N. Route AIA Suite B101 Jupiter, Florida 33468 Tel #: 561-741-4145 Fax #: 561-741-4150

August 19, 2002

Dept. of State PO Box 1500 Div. Of Corp. Uniform Bus Report Filings Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed please find filled out U.B.R. and check for \$150.00. We did not receive the original report form from you, apparently it was lost in the mail.

Thank you,

nan

Fran Sherman Accounting Manager

Professional Management