DOCUMENT # P93000083428 1. Entity Name

EURU VI	i, iivo.			04-23-2002	. 90381 019 13	,0.00	
Principal Place of Business 4350 W CYPRESS ST STE 250 TAMPA FL 33607		Mailing Address 4350 W CYPRESS ST STE 250 TAMPA FL 33607					
US	5 007	US) (1881) 1881 (1888) (1891) 1881) BAR	Kana kana adalah kanan kana akan	1 19 11 (11 (11 (11 (11 (11 (11 (11 (11 (11	
	Place of Business	3. Mailing Address					
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4300 W. Cypress Street 4300 W. Cy			ypress Street	oress Street DO NOT WRITE IN THIS SPACE			
Suite 1075 Suite 10'							
Tampa, FL 33607 Tampa, F			33607	4. FEI Number 65-0475426		Applied For	
Zip	Country	Zip	Country	03 047 3420		lot Applicable	
		1	Country	5. Certificate of Status Desired	□ \$8.75 Ac Fee Requir		
	6. Name and Address of Currer	nt Registered Agent		7. Name and Address of New R			
			Name				
AMEURCO MGMT INC			Stre \(\Delta	300 W. Cypress Street, Sui	ite 1075	:	
	CYPREE ST			Tampa, FL 33607	10/3		
STE 250	1	1	-	ampa, FL 33007			
tampa f	L 33607		City		Zip Coo	/	
	e named entity submits this statement			gistered agent, or both, in the State of Flo			
	Signature, typed or printed name of registered age oration is eligible to satisfy its Intangib	le FILE NOW	TE: Registered Agent signature i	40 Floring Committee Co	DATE	2002	
	requirement and elects to do so. oria on back) OFFICERS AN	Make Check Paya	002 Fee will be \$550 ble to Department o	f State Trust Fund Contribution	Adde	00 May Be d to Fees	
TITLE	P OPFICERS ANI	D Directors Delete	12.	ADDITIONS/CHANGES TO OFFI			
NAME STREET ADDRESS CITY-ST-ZIP	BESSEM, HERMAN 4350 W CYPRESS ST, STE 250 TAMPA FL 33607		NAME STREET ADDRESS CITY-ST-ZIP	4300 W. Cypress Street Suite 1075 Tampa, FL 33607	A Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BESSEM, HERMAN KONINGINEGRACHT 7, 2514 AA DEN HAAG TH	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP BURDGE, BRUCE D 4350 W CYPRESS ST, STE 250 TAMPA FL 33607	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	4300 W. Cypress Street Suite 1075 Tampa, FL 33607	Change	☐ Addition	
itle IAME Itreet Address Ity-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	☐ Addition	
ITLE IAME TREET ADDRESS ITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS		☐ Change	Addition	
ITLE AME TREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS		Change	Addition	
TREET ADDRESS ITY-ST-ZIP 3. I hereby of indicated of the corr	pertify that the information supplied with on this report or supplemental report operation or the receiver or trustee and	the filing does not qualify for the filing does not qualify for the file of th	STREET ADDRESS PITY-ST-ZIP	in Section 119.07(3)(i), Florida Statutes. I f the same legal effect as if made under an 607 Florida Statutes; and that my dema	urther certify that the ir		

changed, or on an attachment with an address

SIGNATURE:

BRUCE D. BURDGE APR EXECUTIVE VICE PRESIDENT

Daytime Phone #