FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

02 SEP 24 AM 9: 27

2002-90132 016 ***550.00

DOCUMENT # P94000045060 1. Entity Name

SWR 767, INC.				TALLAHASSEE, FLORIDA	
DC	NOT WRIT	E IN THIS S	SPACE	B0134	787
Principal Place of Business 3. Mailing Address					
10800 Biscayne Blvd 401 N Tryon S Suite, Apt. #, etc. Suite, Apt. #, etc.				4	
#800 NC1-021-0		NC1-021-02-		DO NOT WRITE IN THIS SPA	CE
City & State Miami FL		Charlotte NC		4. FEI Number 65-0501954	Applied For
Zip 33161	Country	Zip 28255	Country Mecklenburg	5. Certificate of Status Desired \$8	Not Applicable 75 Additional
33101		20233	meckennurg	7. Name and Address of Current Registered Ap	Required
8. The above n	DO NOT IN THIS !	SPACE	Planto	registered agent, or both, in the State of Florida.	
SIGNATURE S	gnature, typed or printed name o	f registered agent and title if ap	plicable. (NOTE: Registered /	Agent signature required when reinstating)	DATE
	ition is eligible to satisfy its li uirement and elects to do so on back)	Afte An	ry 1 - May 1 Fee is \$150.00 or May 1; Fee is \$550.00 nended UBR is \$51.25 Payable to Department of St	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
11.	OFFICERS A	ND DIRECTORS	C Department of St		
IIITE	PRESIDENT & SOL	E DIRECTOR	TITLE		MC PI BAND CB
	Talbot Briddell		NAME		
	10800 Biscayne Bh <u>Miami _FL_33161</u>	vd.; #800	STREET ADORESS CITY - ST - ZIP		345
	P & TREASURER		TITLE		S
	Daniel Chait		NAME		[7
	10800 Biscayne Bl	vd.; #800	STREET ADDRESS CITY - ST - ZIP		
	<u>Miami FL 33161 </u>		TITLE		
	Duane Smith		NAME		
	101 N Tryon St NC		STREET ADDRESS	DO NOT WRITE	
	Charlotte NC 28255		CITY-ST-ZIP	But Carl Carl Carl Carl Carl Carl Carl Carl	
	vp David Vorrath		TITLE HAVE	IN THIS SPACE	
	10800 Biscayne Bh	/d.: #800	STREET ADDRESS	2000	
TTY - ST - ZIP	Miami FL 33161		CITY ST - ZIP		}
TILE .	SECRETARY		TITLE		8.000 (0.000 (0.000)
	Martin Kalb	- J - 11000	NAME		}
	10800 Biscayne Blvd.; #800 Miami_FL - 33161		STREET ACCIAESS CITY - ST - ZUP		
	Mami FL: 33161 ASST. SEC.		TITLE		
	reri Trimmer		NAME		
	10800 Biscayne Blv	/d.; #800	STREET ADDRESS		
CITY - ST - ZIP	<u> Miami FL 33161</u>		CITY - ST - ZIP		
3. I hereby certif	y that the information supplied	ed with this filing does not que	ualify for the exemption stated	in Section 119.07(3)(i), Florida Statutes. I further ce	rtify that the
an officer or d	idicated on this report or sup lirector of the corporation or t ock 11 or on an attachment v	the receiver or trustee empo	pwered to execute this report a	e shall have the same legal effect as if made under a required by Chapter 607, Florida Statutes; and the	r ceth; that I am at my name
		4,	·		1

Duane Smith, SVP

SIGNATURE: Duane Smith, S
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR STF FL32381F.1

JI 5/24/02

8- /2-2002 704-388-2460

Daytime Phone #