

FILED
May 29, 2002 8:00 am
Secretary of State

05-08-2002 90112 004 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000046117

1. Entity Name

MANAGED ASSETS PLUS, INC.

Principal Place of Business

152 WHITAKER ROAD
LUTZ FL 33549

Mailing Address

152 WHITAKER ROAD
LUTZ FL 33549

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3320045

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHELL, STEPHEN B

7TH FL., 226 S. PALAFOX ST.

PENSACOLA FL 32501

Name Kathleen P. Fortune

Street Address (P.O. Box Number is Not Acceptable)

14142 Stonegate Drive

City Tampa

FL

Zip Code 33624

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.

SIGNATURE X

Kathleen P. Fortune

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5-24-02

DATE

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 ☒ Delete
 STREET ADDRESS
 CITY-ST-ZIP
 D MASSEY, GEORGE H JR.
 408 MARINERS ISLE
 MANDERVILLE LA 70448

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP
 D FORTUNE, KATHLEEN P
 14142 STONEGATE DR.
 TAMPA FL 33624

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☒ Addition
 STREET ADDRESS
 CITY-ST-ZIP
 President
 Fortune, Kathleen P.
 14142 Stonegate Drive
 Tampa FL 33624

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

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 607, 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: X

Kathleen P. Fortune

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-02

Date

813-948-7787

Daytime Phone #

CR2E034 (9/01)