

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000057856

FILED
May 28, 2002 8:00 AM
Secretary of State

Entity Name: EWING ASSET MANAGEMENT, INC.

Current Principal Place of Business:

50 N LAURA STREET
STE 3625
JACKSONVILLE, FL 33602

New Principal Place of Business:

Current Mailing Address:

PO BOX 2917
PONTE VEDRA BEACH, FL 32004

New Mailing Address:

3652 SOUTH THIRD STREET
SUITE 200
JACKSONVILLE BEACH, FL 32250

FEI Number: 59-3334578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BISHOP, JR B C
50 N LAURA ST
STE 3625
JAX, FL 32202 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDP () Delete
Name: BISHOP, BENJAMIN C JR
Address: 50 N LAURA ST. STE 3625
City-St-Zip: JACKSONVILLE, FL 32202

Title: AS () Delete
Name: ANDERSON, SHARON
Address: 50 N LAURA ST STE 3625
City-St-Zip: JACKSONVILLE, FL 32202

Title: T () Delete
Name: WALLACE, MICHAEL J
Address: 3652 SOUTH THIRD STREET, SUITE 200
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL J WALLACE

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05/28/2002

Electronic Signature of Signing Officer or Director

Date