

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000075592

FILED
Feb 27, 2002 8:00 AM
Secretary of State

Entity Name: FORTUITY MANAGEMENT, INC.

Current Principal Place of Business:

1830 HOLLY FLOWER
ORANGE PARK, FL 32073

New Principal Place of Business:

1830 HOLLY FLOWER
ORANGE PARK, FL 32003

Current Mailing Address:

1830 HOLLY FLOWER
ORANGE PARK, FL 32073

New Mailing Address:

1830 HOLLY FLOWER
ORANGE PARK, FL 32003

FEI Number: 59-3343979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, TERRANCE A
769 BLANDING BLVD
ORANGE PARK, FL 32065 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: DP () Delete
Name: HAHN, JOANN
Address: 1830 HOLLY FLOWER
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HAHN, JOANN
Address: 1830 HOLLY FLOWER
City-St-Zip: ORANGE PARK, FL 32003

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: JOANN F. HAHN

DP

02/27/2002

Electronic Signature of Signing Officer or Director

Date