

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000084125

FILED  
Sep 18, 2002  
Secretary of State

**Entity Name:** FLORIDA CORPORATE STRATEGIES, INC.

**Current Principal Place of Business:**

31 LOFTING WAY  
STUART, FL 349966513

**New Principal Place of Business:**

**Current Mailing Address:**

6244 MORNING DOVE WAY  
HOBE SOUND, FL 33455

**New Mailing Address:**

**FEI Number:** 65-0792298

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REISER, RAYMOND A  
ONE S.E. 3RD AVENUE  
SUITE 1860  
MIAMI, FL 33131 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: D ( ) Delete  
Name: TODD, FRANK N  
Address: 31 LOFTING WAY  
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete  
Name: TODD, IRENE  
Address: 31 LOFTING WAY  
City-St-Zip: STUART, FL 34996

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: TODD, FRANK N  
Address: 6244 MOURNING DOVE WAY  
City-St-Zip: HOBE SOUND, FL 33455

Title: D (X) Change ( ) Addition  
Name: TODD, IRENE  
Address: 6244 MOURNING DOVE WAY  
City-St-Zip: HOBE SOUND, FL 33455

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: FRANK N. TODD

D

09/18/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date