02 UNIFORM BUSINESS REPORT (UBR) Sep 04, 2002 8:00 am Secretary of State P98000010905 ¿UMENT # 07-02-2002 90814 049 ***150.00 T. MANAGEMENT OF SOUTHWEST FLORIDA, INC. Mailing Address 1105 CAPE CORAL PKWY CAPE CORAL PKWY SUITE C CAPE CORAL FL 33904 بر[©]ORAL FL 33904 3. Mailing Address pal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Apt. #, etc. Applied For 4. FEI Number City & State 94-3286525 State Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Country Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name -Street-Address (P:O:Box Number is Not Acceptable) fight. Christine F IDS CAPE CORAL PKWY E suite C Zip Code City Fl APE CORAL FL 33904 above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing corporation is eligible to satisfy its Intangible After May 1, 2002 Fee will be \$550.00 Added to Fees Trust Fund Contribution. filing requirement and elects to do so. Make Check Payable to Department of State criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS ☐ Change TITLE Delete D NAME AUFSFELD, GUENTER STREET ADDRESS THEODOR-HEUSS-RING 54 PRESS CITY-ST-ZIP D-50668 KOELN, GERMANY Additi Change ☐ Delete TITLE MAME STREET ADDRESS DRESS CITY-ST-ZIP Additi-☐ Defete TITLE MAME STREET ADDRESS ORESS CITY-ST-ZIP Additi: ☐ Change Delete NAME STREET ADDRESS GRESS CITY-ST-ZIP ٦P ☐ Additic ☐ Change ☐ Delete STREET ADDRESS DRESS CITY-ST-ZIP ΊP Additic Change ☐ Delete TITLE NAME STREET ADDRESS ORESS CITY-ST-ZIP reby 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 cated 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 ne 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 inged, or on an attachment with an address, with all other like empowered.

p9800010905

ASSET MANAGEMENT of SOUTHWEST FLORIDA, Inc.

1105 Cape Coral Pkwy East, Suite C Cape Coral FL 33904
Tel.: (239) 540-7007 Telefax (239) 540-2154
e-mail: usanwalt@mindspring.com

DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILINGS P.O. Box 1500 TALLAHASSEE, FL 32302-1500

August 01, 2002

2002 Uniform Business Report

Ladies and gentlemen,

in accordance with the copies enclosed the report was properly filed on 04-17-2002 accompanied by a bank check (\$ 150.00 - 04.17.2002).

Sibterely