2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2002 8:00 AM
Secretary of State

DOCUMENT# P98000019946

Entity Name: SUPERIOR RESIDENCES, INC.

Current Principal Place of Business:

307 W PARK AVE
STE 211
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

307 W PARK AVE
STE 211
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3530658 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORDON-GIRVIN, SHARON M
307 W PARK AVE
STE 211
TALLAHASSEE, FL 32301

Name and Address of New Registered Agent:

CRAWFORD, RICHARD H
13630 LINDEN DR
SPRING HILL, FL 34609

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: RICHARD H. CRAWFORD 04/25/2002
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: DPC ( ) Delete
Name: TAYLOR, DENNIS
Address: 13830 LINDEN DRIVE
City-St-Zip: BROOKSVILLE, FL 34609

Title: D ( ) Delete
Name: TAYLOR, DENNIS
Address: 13630 LINDER DR.
City-St-Zip: SPRING HILLS, FL 34609

Title: DS ( ) Delete
Name: ASHBURN, ROBERT C
Address: 1009 SAN LUIS ROAD
City-St-Zip: TALLAHASSEE, FL 32304

Title: ST ( ) Delete
Name: CRAWFORD, RICHARD H
Address: 13630 LINDEN DR.
City-St-Zip: SPRING HILL, FL 34609

Title: D ( ) Delete
Name: DOUDNEY, DOUGLAS S
Address: 824 NORTH HIGLAND AVENUE
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: MINGER, JOHN
Address: 1350 EAST JOHN SIMS PKWY.
City-St-Zip: NICEVILLE, FL 32578

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:

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: RICHARD H. CRAWFORD CFO 04/25/2002
Electronic Signature of Signing Officer or Director Date