2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000032077

WESTON, FL 33326

City-St-Zip:

Entity Name: ELLEN MYERS, P.A.

FILED Jul 02, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1019 CREEKFORD DR WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** 1019 CREEKFORD DR WESTON, FL 33326 FEI Number: 65-0826178 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STRAUS, ARNOLD M JR. 1290 WESTON RD, STE 314 WESTON, FL 33326 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MYERS, RON Name: Name: 1019 CREEKFORD DR Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: () Delete Title: PD Title: () Change () Addition Name: MYERS, ELLEN Name: 1019 CREEKFORD DR Address: 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: ELLEN MYERS PD 07/02/2002