

FILED
Jul 10, 2000 8:00 am
Secretary of State

07-10-2000 90016 003 ***558.75

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000038715 PL

1. Entity Name

BY & C MANAGEMENT, INC

Principal Place of Business

Mailing Address

22 S. TUTTLE AVE
 #4
 SARASOTA, FL. 34237

22 S. TUTTLE AVE
 #4
 SARASOTA, FL. 34237

2. Principal Place of Business

23 CORPORATE PLAZA

3. Mailing Address

6360 S. TAMiami TR.

Suite, Apt., Etc.

Suite, Apt. #, Etc.

SUITE 180

City & State

NEWPORT BEACH, CA.

City & State

SARASOTA, FL.

Zip

Country

USA

Zip

34231

Country

USA

6. Name and Address of Current Registered Agent

THOMAS M. FITZGIBBONS, ESQ
 22 S. TUTTLE AVE. #4
 SARASOTA FL. 34237

7. Name and Address of New Registered Agent

Name

BRUCE YOUNKER

Street Address (P.O. Box Number is Not Acceptable)

6360 S. TAMiami TRAIL

City

SARASOTA

FL

Zip Code

34231

8. 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

Bruce Younker (BRUCE YOUNKER)

23 JUN 2000

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when (re)registering)

DATE

9. This corporation is eligible to satisfy its intangible
 tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW! FEE IS \$150.00
 After MAY 1, 2000 Fee will be \$550.00
 Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DIRECTOR
 NAME ROBERT A. YOUNKER
 STREET ADDRESS 22 S. TUTTLE AVE #4
 CITY-STATE-ZIP SARASOTA FL 34237

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE
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 STREET ADDRESS
 CITY-STATE-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.

PRES./DIR.
 NAME ROBERT A. YOUNKER
 STREET ADDRESS 23 CORPORATE PLAZA SUITE 180
 CITY-STATE-ZIP NEWPORT BEACH CA. 92660

SECRETARY/DIR.
 NAME CAROL JEAN GEHLKE
 STREET ADDRESS 23 CORPORATE PLAZA SUITE 180
 CITY-STATE-ZIP NEWPORT BEACH CA. 92660

DIR.
 NAME CALVIN K. MEES
 STREET ADDRESS 223 E. F.M. 1382 SUITE 12720
 CITY-STATE-ZIP CEDAR HILL TX 75104

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated 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 of the corporation or the receiver or liquidator empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 as changed, or on an attachment, with an address with all other (re)empowered.

SIGNATURE

ROBERT A. YOUNKER

Date

23 JUN 2000 949-720-7320

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

CR2E034 (9/99)