2000 UNIFORM BUSINESS REPORT: (UBR)

Mailing Address

1020 NORTHWEST 62ND STREET

FORT LAUDERDALE FL 33309

) Sust

City & State

DOCUMENT # P9900001437

FIRST NATIONAL MANAGEMENT GROUP, INC.

1. Entity Name

Principal Place of Business

1020 NORTHWEST 62ND STREET

FORT LAUDERDALE FL 33309

2. Principal Place of Business

Suite, Apt. #, etc.

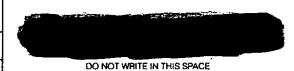
City & State

9/13/00-90050-007-\$550.00-\$550.00

FILED

ON OCT -2 AM 9:43

STATE TARY OF STATE TARBAHANDE, PURIDA



14-290048 Zip Country Country 5. Certificate of Status Desired USA 6. Name and Address of Current Registered Agen 7. Name and Address of New Registered Agent Name WHITTINGTON, KEELY Street Address (P.O. Box Number is Not Acceptable) 1020 NORTHWEST 62ND STREET

4. FEI, Number

	City	FL	Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered	ed office or registered agent, or both, in the State of Florida			
SIGNATURE				
SIGHTH OFFIC			***	

9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)

FORT LAUDERDALE FL 33309

FILE NOW!!! FEE IS \$550.00 After SEPTEMBER 13, 2000 Min. will be \$750.00 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Applied For

\$8.75 Additional

Fee Required

Not Applicable

11.	OFFICERS AND DIRECTORS	12,	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY+ST-ZIP	D De WHITTINGTON, KEELY 1020 NORTHWEST 62ND STREET FORT LAUDERDALE FL 33309	Hele TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition
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13. I hereby certify that the information supplied with this filling floes not quoted for the exemption stated in Section 119.07(3Xi). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that the signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation on the receiver of trustee emporated to execute this port as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an additional point and other like empowered.

SIGNATURE: