FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 07, 2002 8:00 am Secretary of State P99000041609 DOCUMENT # 1. Entity Name 07-2002 90057 037 ***150 SRQ PROPERTY INVESTMENTS, INC. Principal Place of Business Mailing Address 6033 34TH STREET WEST 6033 34TH STREET WEST **BRADENTON FL 34210 BRADENTON FL 34210** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE SUITE A 4. FEI Number Applied For -65-0934504 Not Applicable \$8.75 Additional 5. Certificate of Status Desired MANATEL MANATF Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COOK, THOMAS W Street Address (P.O. Box Number is Not Acceptable) 4416 MANGROVE POINT RD **BRADENTON FL 34210** MBERKIVIND 8. The above named enlity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. THOMAS SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. (9/01) X Change TITLE ☐ Addition TITLE ☐ Delete COOK, GAIL S 1744 AMBERWYND CIR COOK, GAIL S NAME NAME 4416 MANGROVE POINT ROAD STREET ADDRESS STREET ADDRESS **BRADENTON FL 34210** PÁLMETTO, FN 34221-5630 CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE COOK, THOMAS W COOK, THOMAS W NAME NAME 4416 MANGROVE POINT ROAD STREET ADDRESS STREET ADDRESS 744 AMERWYND CIR **BRADENTON FL 34210** CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition SPIE, WAYNE PATRICK NAME NAME 4009 11TH ST CT W # 4 STREET ADDRESS STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIP CITY-ST-ZIF ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby 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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

changed, or on an attachment with an