

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 02 JAN 11 PM 4:00

DOCUMENT # P99000043348
1. Entity Name
 MUNDELL MANAGEMENT, INC.

Principal Place of Business **Mailing Address**
 400 Magnolia Lake Drive
 Longwood, FL 32779

2. Principal Place of Business **3. Mailing Address**
 2300 N. Atlantic Ave #101
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
 Daytona Beach, FL 32118

Zip **Country** **Zip** **Country**

4. FEI Number **Applied For**
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 John C. Mundell
 2300 N. Atlantic Ave #101
 Daytona Beach, FL 32118

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 John C. Mundell DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001, 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	P/D	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
		John C. Mundell	2937 S. Atlantic Avenue, #1704-06	Daytona Beach, FL 32118	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

100004785221-4
 -01/18/02-0102-019
 ***150.00 ***150.00

AD

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John C. Mundell **President** Date _____ Designation _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)