

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2003 8:00 am
Secretary of State

03-26-2003 90185 029 ***150.00

DOCUMENT # P99000043348

1. Entity Name

MUNDELL MANAGEMENT, INC.



Principal Place of Business

2300 N. ATLANTIC AVE
#101
DAYTONA BEACH FL 32118

Mailing Address

2300 N. ATLANTIC AVE
#101
DAYTONA BEACH FL 32118

2. Principal Place of Business

465 TOWER ROAD

3. Mailing Address

465 TOWER ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BARRINGTON IL

City & State

BARRINGTON IL

Zip

60010

Country

UNITED STATES

Zip

60010

Country

UNITED STATES

4. FEI Number

59-3581752

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MUNDELL, JOHN C
2300 N. ATLANTIC AVE
#101
DAYTONA BEACH FL 32118

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
MUNDELL, JOHN C
2300 N. ATLANTIC AVE
DAYTONA BEACH FL 32118

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
PEPPER, CHRISTINE
465 TOWER ROAD
BARRINGTON IL 60010

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Christine Pepper
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 21/03 / 8473825091
Date Daytime Phone #

CR2E034 (10/02)