2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000057770

Entity Name: HOKAMP CORPORATION

FILED Sep 02, 2002 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2791 BEE RIDGE RD SARASOTA, FL 34239 **Current Mailing Address: New Mailing Address:** 4912 FALLCREST CR SARASOTA, FL 34233 FEI Number: 59-3585617 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DARNELL, ROBERT W 2033 MAIN STREET STE 400 SARASOTA, FL 34237 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS () Delete Title: DPTS (X) Change () Addition HOKAMP, JEFFREY H HOKAMP, JEFFREY H Name: Name: 4912 FALL CREST CT 4912 FALLCREST CIRCLE Address: Address: City-St-Zip: SARASOTA, FL 34233 City-St-Zip: SARASOTA, FL 34233

 $\label{eq:title:V} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{V} \qquad \mbox{(X) Change () Addition}$

Name:HOKAMP, NADINEName:HOKAMP, NADINEAddress:4912 FAUCREST CIRCLEAddress:4912 FALLCREST CIRCLECity-St-Zip:SARASOTA, FL 34233City-St-Zip:SARASOTA, FL 34233

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY H. HOKAMP DPTS 09/02/2002