

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91752 047 ***150.00

DOCUMENT # P99000058198

1. Entity Name

EURO XVII, INC.

Principal Place of Business

**C/O EURO AMERICAN MANAGEMENT, INC.
4350 W CYPRESS ST. SUITE 250
TAMPA FL 33607**

Mailing Address

**C/O EURO AMERICAN MANAGEMENT, INC.
4350 W CYPRESS ST. SUITE 250
TAMPA FL 33607**

2. Principal Place of Business

3. Mailing Address

**S 4300 W. Cypress Street
Suite 1075
Tampa, FL 33607****4300 W. Cypress Street
Suite 1075
Tampa, FL 33607**

4. FEI Number

59-3589075

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**AMEURCO MANAGEMENT, INC.
4350 W CYPRESS ST, SUITE 250
TAMPA FL 33607**

7. Name and Address of New Registered Agent

Name

Street

**4300 W. Cypress Street, Suite 1075
Tampa, FL 33607**

City

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida.

BRUCE D. BURDGE**EXECUTIVE VICE PRESIDENT****APR 4 2002**

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2002 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 EVP
NAME BURDGE, BRUCE D
STREET ADDRESS 4350 W. CYPRESS ST. #250
CITY-ST-ZIP TAMPA FL 33607** ☐ Delete**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Delete**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Delete**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Delete**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Delete**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

**TITLE
NAME 4300 W. Cypress Street
STREET ADDRESS Suite 1075
CITY-ST-ZIP Tampa, FL 33607** ☒ Change ☐ Addition**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Change ☐ Addition**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Change ☐ Addition**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Change ☐ Addition**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Change ☐ Addition**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRUCE D. BURDGE
EXECUTIVE VICE PRESIDENT**APR 4 2002**

Date

Daytime Phone #

813-353-8800

CR2E034 (9/01)