## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P99000080897

City-St-Zip: CHARLOTTE HARBOR, FL 33980

Entity Name: BUELOW FINANCIAL SERVICES, INC.

FILED Apr 26, 2002 8:00 AM Secretary of State

0		of Burgins and	Nove Being des I Blace	of Business		
Current Pi	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:		
4369 TAMI. CHARLOT	AMI TRAIL TE HARBOR, I	FL 33980				
Current M	ailing Addres	s:	New Mailing Addres	New Mailing Address:		
4369 TAMI. CHARLOT	AMI TRAIL TE HARBOR, I	FL 33980				
FEI Number:	65-0950044	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)		
Name and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:		
BUELOW, 4369 TAMI, CHARLOT		FL 33980				
The above in the State		ubmits this statement for the p	urpose of changing its registere	d office or registered agent, or both,		
SIGNATUR	RE:					
		c Signature of Registered Age	ent	Date		
•	-	satisfy its Intangible Tax filing req	uirement and elects to do so (X).			
	AND DIRECT	, ,	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	BUELOW, DALE 4369 TAMIAMI T		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	GAGNON, ALEX 4369 TAMIAMI T		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	EDLER, TERRÍ 4369 TAMIAMI T	Delete RAIL RBOR, FL 33980	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address:	D () HOFFMAN, WIL 4369 TAMIAMI T		Title: Name: Address:	() Change () Addition		

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.

City-St-Zip:

	SIGNATURE: DALE BUELOW	PD	04/26/2002
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