

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000089019

FILED
Jan 18, 2002 8:00 AM
Secretary of State

Entity Name: CNI HOLDING CORPORATION

Current Principal Place of Business:

28059 U.S. HIGHWAY 19 N.
CLEARWATER, FL 33761

New Principal Place of Business:

28059 U.S. HIGHWAY 19 N.
SUITE 300
CLEARWATER, FL 33761

Current Mailing Address:

PO BOX 383
SAFETY HARBOR, FL 34695

New Mailing Address:

FEI Number: 59-3601506 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHREFFLER, ROBERT
28059 U.S. HIGHWAY 19 N.,STE.300
CLEARWATER, FL 33761

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: RUBECK, DUSTIN
Address: 28059 U.S. HIGHWAY 19 N.,STE.300
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: DEMASO, JOSEPH A
Address: 28059 US HWY 19 N STE 300
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: ANDERSON, DONALD V
Address: 28059 US HWY 19 N STE 300
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DUSTIN RUBECK

D

01/18/2002

Electronic Signature of Signing Officer or Director

_____ Date