2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 AM
Secretary of State

DOCUMENT# P99000096992

Entity Name: RESURE ASSOCIATES, INC.

Current Principal Place of Business:

36 W. ILLIANA STREET
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

36 W. ILLIANA STREET
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-3608816 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOWRY, H. CLAY
36 W. ILLIANA STREET
ORLANDO, FL 32806

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: P ( ) Delete
Name: LOWRY, H. CLAY
Address: 1819 OSMAN AVE
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LOWRY, H. CLAY
Address: 8015 LANDGROVE COURT
City-St-Zip: ORLANDO, FL 32819

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: H. CLAY LOWRY P 04/30/2002

Electronic Signature of Signing Officer or Director Date