2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 07, 2002 8:00 am Secretary of State S37116 DOCUMENT # 1. Entity Name 05-07-2002 90237 042 ***158.75 VERO PROPERTY MANAGEMENT INC VERO TECHNICAL SUPPORT Principal Place of Business Mailing Address 155 31ST AVE SW POST OFFICE BOX 774 VERO BEACH FL 32968 VERO BEACH FL 32961 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0277963 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GEORGE JIGLER LIGHTFÖQT/JUDITH E. 155 31ST AVE., SW vero beach fl 32968 BEACH, 8. 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 gent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Change ☐ Addition SIGLER, GEORGE B NAME NAME STREET ADDRESS 155 31ST AVE., SW STREET ADDRESS VERO BEACH FL 32968 CITY-ST-ZIP CITY-ST-ZIP SIGLER, GEDRGE, B TITLE Delete TITLE **X** Change ■ Addition LIGHTFOOT, JUDITH-NAME NAME STREET ADDRESS 155 31ST-AVE-SW STREET ADDRESS 155 31ST AVE SW CITY-ST-ZIP VERO BEACH FL 32968 CITY-ST-ZIP VERD BEACH, FL 32968 TITLE ☐ Delete TITLE ☐ Addition NAME SIGLER, GEORGE NAME STREET ADDRESS 155 31ST AVE. SW STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32968 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME

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

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP