

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S58076

FILED  
Apr 03, 2012  
Secretary of State

Entity Name: AMEURCO MANAGEMENT, INC.

**Current Principal Place of Business:**

2203 N. LOIS AVE.  
STE 900  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

2203 N. LOIS AVE.  
STE 900  
TAMPA, FL 33607 US

**New Mailing Address:**

FEI Number: 98-0124413      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

AMEURCO MGMT INC.  
2203 N. LOIS AVE  
STE 900  
TAMPA, FL 33607 US

**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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: VAN DER EEMS, DIRK  
Address: 2203 N LOIS AVE, SUITE 900  
City-St-Zip: TAMPA, FL 33607

Title: S  
Name: VAN DER EEMS, DIRK  
Address: 2203 N LOIS AVE, SUITE 900  
City-St-Zip: TAMPA, FL 33607

Title: T  
Name: VAN DER EEMS, DIRK  
Address: 2203 N LOIS AVE, SUITE 900  
City-St-Zip: TAMPA, FL 33607

I hereby 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 all other like empowered.

SIGNATURE: D VAN DER EEMS

P

04/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date