

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 20, 2001 8:00 am
Secretary of State

04-20-2001 90172 025 ***150.00

DOCUMENT # V08296

1. Entity Name
ICORR PROPERTIES INC.

Principal Place of Business 2 NO TAMIAMI TR STE 210 SARASOTA FL 34236 US	Mailing Address 2 NO TAMIAMI TRAIL STE 210 SARASOTA FL 34236 US
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744110



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0314218		Applied For	
Suite, Apt. #, etc. Ste. 210		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent MCGRATH, JUDY 2 NO TAMIAMI TR STE 210 SARASOTA FL 34236				7. Name and Address of New Registered Agent			
				Name Black, Ian			
				Street Address (P.O. Box Number is Not Acceptable) 2 N. Tamiami Tr., Ste. 210			
				City Sarasota		FL	Zip Code 34236

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 *[Signature]* DATE **3/21/01**

(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WOLF, NORTON 572 WELLINGTON ST LONDON, ONTARIO, CAN	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Wolf, Norton 700 Richmond Street, Ste. 410 London, Ontario N6A 5C7 Canada
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS WOLF, RON 2 NO TAMIAMI TRAIL, STE. 710 SARASOTA FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS Wolf, Ron 2 N. Tamiami Tr., Ste. 210 Sarasota, FL 34236 USA
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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.

SIGNATURE: *[Signature]* DATE **3/21/01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)