2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

V58928 DOCUMENT

1. Entity Name



FILED Jan 08, 2003 8:00 am Secretary of State

01-08-2003 90145 040 ***150 00

BURGESS, HARRELL, MANCUSO, OLSON & COLTON, P.A.		
Principal Place of Business 1776 RINGLING BLVD. SARASOTA FL 34236 US	Mailing Address 1776 RINGLING BLVD. SARASOTA FL 34236 US	-
2. Principal Place of Business	3. Mailing Address	



Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 65-0352688 Not Applicable **\$8.75** Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HARRELL, DONALD J. Street Address (P.O. Box Number is Not Acceptable) 1776 RINGLING BLVD. SARASOTA FL 34236 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. SR2E034 (10/02) Change ☐ Addition TITLE TITLE . ☐ Delete NAME NAME BURGESS, JAMES H JR. STOTET ADDRESS 1776 RINGLING BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 33246 Change ☐ Addition ☐ Delete TITLE TITLE VSD NAME NAME HARRELL, DONALD J STREET ADDRESS STREET ADDRESS 1776 RINGLING BLVD CITY-ST-ZIP CITY-ST-7IP SARASOTA FL 34236 ☐ Addition Change TITLE ☐ Detete TITLE VATD NAME NAME MANCUSO, LYNETTE R STREET ADDRESS STREET ADDRESS 1776 RINGLING BLVD CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 ☐ Addition ☐ Change Delete TITLE TITLE VTAD NAME NAME OLSON, PAUL E STREET ADDRESS STREET ADDRESS 1776 RINGLING BLVD CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME COLTON, JOHN A STREET ADDRESS STREET ADDRESS 1776 RINGLING BLVD CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment

SIGNATURE:

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