## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 16, 2002 8:00 am Secretary of State **DOCUMENT #** V65830 1. Entity Name 04-16-2002 90180 041 \*\*\*150.00 AI INSIGHT, INC. Principal Place of Business Mailing Address 602 COURTLAND ST. 602 COURTLAND ST. STE 400 **STE 400** ORLANDO FL 32804 ORLANDO FL 32804 US 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 59-3145074 Not Applicable Zip Zip Country 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 Name EPSTEIN, STEVE Street Address (P.O. Box Number is Not Acceptable) **602 COURTLAND ST** SUITE 400 ORLANDO FL 32804 City Zip Code FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Chairman, CEO, President & Change TITLE TITI F Delete Steve M. Epstein Loga Courtland St. Sutte 400 NAMÉ BLAIR, MARDIAN J NAME STREET ADDRESS 602 COURTLAND ST. STE 400 STREET ADDRESS ORLANDO FL CITY-ST-ZIP CITY-ST-ZIP Orvando FL 3 32804 Delete **VC** TITLE TITLE ed. Diane Lee NAME EPSTEIN. STEVEN M NAME 602 COURTLAND ST SUITE 400 Courtland St. Suite 400 STREET ADDRESS STREET ADDRESS CITY-ST-7IP ORLANDO FL 32804 🍀 CITY-ST-ZIP Orlando FL 32804 Delete TITLE TITLE ☐ Change Addition Director Edward F. Refsnyder Los Courtland St. Suite NAME SHAW, TERRY NAME STREET ADDRESS 601 E ROLLINS ST STREET ADDRESS 32804 CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP Orlanda SD ☐ Change Addition Delete TITLE Directa Harry L. Henning Low Courtland St. Suite 400 LEE, DIANE J NAME 602 COURTLAND ST., STE. 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32804 CITY-ST-ZIP Orlando FL 3280 ☐ Delete TITLE Al Addition TITLE NAME Vicke Wroten NAME 602 Courtland St. Suite 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Orlando FL 32804 TITLE ☐ Delete TITLE ☐ Change noitibba 🔲 NAME NAME STREET ADDRESS STREET ADDRESS . CITY-ST-7IP 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 of the corporation or the receiver or trustee empower changed, or on an attachment with an address, with otcue Epstein 4/5/02 40 SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)