CR2E034 (9/01)

2002 Uniform Business Report (UBR)

Mar 19, 2002 8:00 am Secretary of State DOCUMENT # L29149 1. Entity Name 03-19-2002 90026 026 ***150 00 DRUCKER & FALK MANAGEMENT CORPORATION OF FLORIDA . INC. Principal Place of Business Mailing Address 9286 WARWICK BOULEVARD 9286 WARWICK BOULEVARD **NEWPORT NEWS VA 23607** NEWPORT NEWS VA 23607 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 65-0161353 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 DEWITT, SHERRI K Street Address (P.O. Box Number is Not Acceptable) 37 NORTH ORANGE AVE., STE. 840 ORLANDO FL 32801 City Zip Code 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) DATE 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE Addition DRUCKER, ERWIN B NAME NAME STREET ADDRESS 9286 WARWICK BLVD. STREET ADDRESS CITY-ST-71P **NEWPORT NEWS VA** CITY-ST-ZIP TITLE VD. ☐ Delete ☐ Addition NAME ORANGE, JERRY NAME STREET ADDRESS STREET ADDRESS 15551 HARTRIDGE ROAD CITY-ST-ZIP CITY-ST-ZIP DAVIE FL 33331-2556 TITLE SD ----- Delete TITLE ☐ Change ☐ Addition NAME MUNICK, JOHN A JR. NAME STREET ADDRESS 9286 WARWICK BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEWPORT NEWS VA 23607** TITLE ☐ Delete TITLE □ Change ☐ Addition NAME FALK, DAVID C SR. NAME STREET ADDRESS 9286 WARWICK BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **NEWPORT NEWS VA** TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

REBHN MUNICK Jn 1/21/02 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

changed, or on an attachment with an address, with all other like empowered.

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