

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 688966

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: GLENN'S RARE COINS, INC.

Current Principal Place of Business:

16072 US HWY 19 NO
CLEARWATER, FL 34624 US

New Principal Place of Business:

16072 US HWY 19 NO
CLEARWATER, FL 33764 US

Current Mailing Address:

6228 56TH AVE NO
ST PETERSBURG, FL 33709

New Mailing Address:

6228 56TH AVE NO
ST PETERSBURG, FL 33709 US

FEI Number: 59-2328503

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAVERS, GLENN
6228 56TH AVE. NORTH
ST. PETERSBURG, FL 33709

Name and Address of New Registered Agent:

SHAVERS, GLENN
6228 56TH AVE. NORTH
ST. PETERSBURG, FL 33709

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: GLENN SHAVERS

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHAVERS, GLENN,
Address: 6228 56 AVE NO
City-St-Zip: ST PETERSBURG, FL

Title: VS () Delete
Name: SHAVERS, CAROL W.,
Address: 6228 56 AVE NO
City-St-Zip: ST PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SHAVERS, GLENN,
Address: 6228 56 AVE NO
City-St-Zip: ST PETERSBURG, FL 33709 US

Title: VS (X) Change () Addition
Name: SHAVERS, CAROL W.,
Address: 6228 56 AVE NO
City-St-Zip: ST PETERSBURG, FL 33709 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CAROL W. SHAVERS

VS

04/30/2002

Electronic Signature of Signing Officer or Director

Date