

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G70003

FILED
Jan 14, 2003
Secretary of State

Entity Name: OXLEY & BRANNON CONSTRUCTION CONSULTANTS, INC.

Current Principal Place of Business:

475 CENTRAL AVE, SUITE 200
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

475 CENTRAL AVE, SUITE 200
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 59-2242935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OXLEY, JOHN RICHARD
1201 MONTICELLO BLVD. NORTH
ST. PETERSBURG, FL 33703 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: OXLEY, JOHN RICHARD
Address: 1201 MONTICELLO BLVD. NORTH
City-St-Zip: ST. PETERSBURG, FL 33073

Title: DV () Delete
Name: BRANNON, PATRICK W
Address: 8343 37TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN R. OXLEY

DPS

01/14/2003

Electronic Signature of Signing Officer or Director

Date