

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H74341

FILED  
Mar 05, 2003  
Secretary of State

Entity Name: SHAFER'S CLASSIC REPRODUCTIONS, INC.

**Current Principal Place of Business:**

5407 24TH AVE SOUTH  
TAMPA, FL 33619 US

**New Principal Place of Business:**

**Current Mailing Address:**

5407 24TH AVE SOUTH  
TAMPA, FL 33619 US

**New Mailing Address:**

FEI Number: 59-2581833      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MANEY, RICHARD HENRY  
101 E KENNEDY BLVD  
STE 3170  
TAMPA, FL 33602 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: PD ( ) Delete  
Name: SHAFER, WARREN L.,  
Address: POST OFFICE BOX 2836  
City-St-Zip: BRANDON, FL 33509

Title: STD ( ) Delete  
Name: SHAFER, PATRICIA M.,  
Address: POST OFFICE BOX 2836  
City-St-Zip: BRANDON, FL 33509

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SHAFER, WARREN L.,  
Address: 301 10TH AVENUE EAST  
City-St-Zip: PALMETTO, FL 34221

Title: STD (X) Change ( ) Addition  
Name: SHAFER, PATRICIA M.,  
Address: 301 10TH AVENUE EAST  
City-St-Zip: PALMETTO, FL 34221

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: PATRICIA M. SHAFER

VP

03/05/2003

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date