

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J65990

FILED
Jan 27, 2003
Secretary of State

Entity Name: LAMORTE SEARCH ASSOCIATES, INC.

Current Principal Place of Business:

3003 YAMATO RD
SUITE C8- 1073
BOCA RATON, FL 33434

New Principal Place of Business:

Current Mailing Address:

3003 YAMATO RD
STE C8-1073
BOCA RATON, FL 33434 US

New Mailing Address:

4412 WOODFIELD BLVD.
BOCA RATON, FL 33434 US

FEI Number: 59-2810453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPPELLER, JR., JOHN M ATTY
350 CAMINO GARDENS BLVD.
#303
BOCA RATON, FL 33432 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: LAMORTE, WILLIAM M.,
Address: 4412 WOODFIELD BLVD.
City-St-Zip: BOCA RATON, FL

Title: STD () Delete
Name: LAMORTE, MICHELLE F.,
Address: 4412 WOODFIELD BLVD.
City-St-Zip: BOCA RATON, FL

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: MICHELLE LAMORTE

STD

01/27/2003

Electronic Signature of Signing Officer or Director

_____ Date