

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90172 011 ***150.00

DOCUMENT # **J90380**



1. Entity Name
6024 26TH STREET WEST, INC.

Principal Place of Business
**5704 MANATEE AVE. W.
BRADENTON FL 34209-2539**

Mailing Address
**5704 MANATEE AVE. W.
BRADENTON FL 34209-2539**

10017290



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
2424 LANDINGS Circle
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
BRADENTON FL

4. FEI Number **59-2837305**
Applied For
 Not Applicable

Zip **34209** Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**OLSON, RICHARD S
5704 MANATEE AVE. W.
BRADENTON FL 34209-2539**
RICHARD S. OLSON

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
2424 LANDINGS Circle
BRADENTON FL 34209

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. I am familiar with, and accept the obligations of registered agent.
R. S. Olson, PRES.
SIGNATURE _____ DATE **01/29/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003: Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSD OLSON, RICHARD S 5704 MANATEE AVE. W. BRADENTON FL 34209-2539 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2424 LANDINGS Circle BRADENTON FL 34209 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: *RICHARD S. OLSON*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **01/29/03** Daytime Phone # **941-754 5465**

CR2E034 (10/02)