


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90200 007 ****61.25

DOCUMENT # N01000008288

1. Entity Name
455 HARRISON AVENUE GROUP, INC.



Principal Place of Business Mailing Address

**227 HARRISON AVE.
PANAMA CITY FL 32401** **227 HARRISON AVE.
PANAMA CITY FL 32401**

2. Principal Place of Business 3. Mailing Address

455 Harrison Ave **455 Harrison Ave**

Suite, Apt. #, etc. Suite, Apt. #, etc.

Suite C **Suite C**

City & State City & State

Panama City FL **Panama City FL**

Country Country

USA **USA**



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

BOZARTH, JOHN L
455 HARRISON AVE.
PANAMA CITY FL 32401

7. Name and Address of New Registered Agent

Name **Bill Bass**

Street Address (P.O. Box Number is Not Acceptable)
455 HARRISON AVE.

Suite C

City **Panama City** State **FL** Zip Code **32401**

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.

SIGNATURE *W. D. Bass* DATE *1/6/03*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	BOZARTH, JOHN L	
STREET ADDRESS	451 MAGNOLIA AVE.	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE	VD	<input type="checkbox"/> Delete
NAME	BENSE, ALLAN	
STREET ADDRESS	4116 HWY. 231 NORTH	
CITY-ST-ZIP	PANAMA CITY FL 32404	
TITLE	SD	<input type="checkbox"/> Delete
NAME	HALL, GARY L	
STREET ADDRESS	100 CHERRY ST., STE. 301	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BASS, WILLIAM D	
STREET ADDRESS	227 HARRISON AVE.	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *W. D. Bass* DATE: *1/6/03*

REVISIONS REQUIRED

CR2E037 (10/02)