2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2003
Secretary of State

DOCUMENT# N95000000298

Entity Name: THE MCINTYRE FAMILY FOUNDATION, INC.

Current Principal Place of Business:

ONE DITEK CENTER
1720 STARKEY ROAD
LARGO, FL 33771 US

New Principal Place of Business:

Current Mailing Address:

ONE DITEK CENTER
1720 STARKEY ROAD
LARGO, FL 33771 US

New Mailing Address:

FEI Number: 59-3322336 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PFEIFFER, CYNTHIA J
1485 PRESCOTT AVE S
CLEARWATER, FL 34616 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MCINTYRE, JOANNE
Address: 8687 MAIDSTONE CT
City-St-Zip: LARGO, FL 33777

Title: D ( ) Delete
Name: HAMMER, MARK
Address: 9373 SEMINOLE BLVD
City-St-Zip: SEMINOLE, FL 33772

Title: D ( ) Delete
Name: WILSON, ROBERT
Address: 12744 9TH AVE N
City-St-Zip: SEMINOLE, FL

Title: P ( ) Delete
Name: MCINTYRE, ROBERT D
Address: 1720 STARKEY RD.
City-St-Zip: LARGO, FL

Title: S ( ) Delete
Name: MILLER, PHYLLIS
Address: 907 LEONA DR.
City-St-Zip: LARGO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT D MCINTYRE P 01/28/2003

Electronic Signature of Signing Officer or Director — Date