

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000068562

FILED
Jan 14, 2003
Secretary of State

Entity Name: 1 CONSORTIUM, INC.

Current Principal Place of Business:

1248 POTOMAC DR
MERRITT ISLAND, FL 32952

New Principal Place of Business:

New Mailing Address:

1732 W. ABINGDON DRIVE
102
ALEXANDRIA, VA 22314

Current Mailing Address:

1248 POTOMAC DR
MERRITT ISLAND, FL 32952

FEI Number: 59-3739022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UBL, THOMAS M
1248 POTOMAC DR
MERRITT ISLAND, FL 32952 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: DP () Delete
Name: UBL, THOMAS M
Address: 1248 POTOMAC DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: T () Delete
Name: BALDWIN, DONNA R
Address: 4515 LITTLE RIVER RUN
City-St-Zip: ANNANDALE, VA 22003

Title: S () Delete
Name: UBL, PRISCILLA J
Address: 1248 POTOMAC DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: V () Delete
Name: BALDWIN, DONNA R
Address: 4515 LITTLE RIVER RUND
City-St-Zip: ANNANDALE, VA 22003

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: UBL, THOMAS M
Address: 1248 POTOMAC DR
City-St-Zip: MERRITT ISLAND, FL 32952

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: D () Change (X) Addition
Name: UBL, THOMAS M
Address: 1248 POTOMAC DR
City-St-Zip: MERRITT ISLAND, FL 22314

Title: M () Change (X) Addition
Name: NAPOLI, RON A
Address: 1420 W. ABINGDON DR., #339
City-St-Zip: ALEXANDRIA, VA 32952

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: THOMAS M. UBL

DP

01/14/2003

Electronic Signature of Signing Officer or Director

Date