

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000046413

FILED
May 01, 2003
Secretary of State

Entity Name: NEXTECH STRATEGIES, INC.

Current Principal Place of Business:

502 S FREMONT AVE STE 505
TAMPA, FL 33606

New Principal Place of Business:

13200 W NEWBERRY RD
U117
NEWBERRY, FL 32669

Current Mailing Address:

502 S FREMONT AVE STE 505
TAMPA, FL 33606

New Mailing Address:

13200 W NEWBERRY RD
U117
NEWBERRY, FL 32669

FEI Number: 81-0549066

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMIDT, G. BOOKER
502 S FREMONT AVE STE 505
TAMPA, FL 33606

Name and Address of New Registered Agent:

SCHMIDT, G. BOOKER
13200 W NEWBERRY RD
U117
NEWBERRY, FL 32669

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:

05/01/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: SCHMIDT, G. BOOKER MR
Address: 13200 W NEWBERRY RD STE U117
City-St-Zip: NEWBERRY, FL 32669

Title: P () Change (X) Addition
Name: SCHMIDT, G. BOOKER MR
Address: 13200 W NEWBERRY RD STE U117
City-St-Zip: NEWBERRY, FL 32669

Title: S,T () Change (X) Addition
Name: SCHMIDT, G. BOOKER MR
Address: 13200 W NEWBERRY RD STE U117
City-St-Zip: NEWBERRY, FL 32669

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: G BOOKER SCHMIDT

D

05/01/2003

Electronic Signature of Signing Officer or Director

Date