

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000117182

FILED
Jan 16, 2003
Secretary of State

Entity Name: ADVISORS ADMINISTRATIVE SERVICES, INC,

Current Principal Place of Business:

6101 34TH ST WEST
25H
BRADENTON, FL 34210

New Principal Place of Business:

Current Mailing Address:

3522 53RD AVENUE WEST
205
BRADENTON, FL 34210

New Mailing Address:

FEI Number: 22-3885489 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOYEN, BERNARD L
6101 34TH STREET W
25H
BRADENTON, FL 34210

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: () 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: MR. () Change (X) Addition
Name: KOYEN, BERNARD L PRESIDE
Address: 6101 34TH STREET WEST, UNIT 25H
City-St-Zip: BRADENTON, FL 34210 US

Title: MR. () Change (X) Addition
Name: PRIDGEN, GARY L VP
Address: 4300 LAKESIDE DRIVE, #13
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: MRS. () Change (X) Addition
Name: KOYEN, CONNIE S VP
Address: 6101 34TH STREET WEST, UNIT 25H
City-St-Zip: BRADENTON, FL 34210 US

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: BERNARD L. KOYEN

_____ Electronic Signature of Signing Officer or Director

MR.

01/16/2003

_____ Date