

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000121599

FILED
May 01, 2003
Secretary of State

Entity Name: LEGAL SUPPORT AND TAX SERVICES, INC.

Current Principal Place of Business:

2431 ALOMA AVENUE
SUITE 211
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

2431 ALOMA AVENUE
SUITE 211
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 42-1558976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, KATHLEEN M
2431 ALOMA AVENUE
SUITE 211
WINTER PARK, FL 32792 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: P () Delete
Name: ROBERTS, KATHLEEN M
Address: 2431 ALOMA AVENUE, SUITE 211
City-St-Zip: WINTER PARK,, FL 32792

Title: SEC. () Delete
Name: ROBERTS, KATHLEEN M
Address: 2431 ALOMA AVENUE, SUITE 211
City-St-Zip: WINTER PARK,, FL 32792

Title: TREA () Delete
Name: ROBERTS, KATHLEEN M
Address: 2431 ALOMA AVENUE
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: ROBERTS, KATHLEEN M
Address: 2431 ALOMA AVENUE, SUITE 211
City-St-Zip: WINTER PARK, FL 32792

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:

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: KATHLEEN M. ROBERTS

PRES

05/01/2003

Electronic Signature of Signing Officer or Director

Date