

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000090693

FILED
Apr 30, 2003
Secretary of State

Entity Name: O'CONNOR FRAMING, INC.

Current Principal Place of Business:

5997 BROWN LANE
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

5997 BROWN LANE
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-0628862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNOR, CHRIS
5263 PORTLAND WAY
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

O'CONNOR, CHRIS
5997 BROWN LANE
SARASOTA, FL 34232 US

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: CHRIS O'CONNOR

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: O'CONNOR, CHRIS
Address: 5263 PORTLAND WAY
City-St-Zip: SARASOTA, FL 34231

Title: VP () Delete
Name: O'CONNOR, CHRISTY
Address: 5997 BROWN LANE
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: O'CONNOR, CHRIS
Address: 5997 BROWN LANE
City-St-Zip: SARASOTA, FL 34232

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: CHRIS O'CONNOR

P

04/30/2003

Electronic Signature of Signing Officer or Director

Date