

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000000900

FILED  
Jan 24, 2003  
Secretary of State

Entity Name: TEAM NATIONAL PRODUCTS, INC.

## Current Principal Place of Business:

4350 OAKES ROAD  
SUITE 512  
DAVIE, FL 33314

## New Principal Place of Business:

## Current Mailing Address:

4350 OAKES ROAD  
SUITE 512  
DAVIE, FL 33314

## New Mailing Address:

FEI Number: 65-0734685

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOEHR, RICHARD  
2175 STATE ROAD 84  
FORT LAUDERDALE, FL 33312

## 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: D ( ) Delete  
Name: LOEHR, RICHARD  
Address: 2175 STATE ROAD 84  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: C ( ) Delete  
Name: LOCHER, MARYLOU  
Address: 2175 STATE RD 84  
City-St-Zip: FT LAUDERDALE, FL 33312

Title: VTSD ( ) Delete  
Name: BOOZER, CAROL L  
Address: 2175 STATE RD 84  
City-St-Zip: FT LAUDERDALE, FL 33312

Title: D ( ) Delete  
Name: DAVIS, LYNDIA M  
Address: 2175 STATE RD 84  
City-St-Zip: FT LAUDERDALE, FL

Title: D ( ) Delete  
Name: BORR, DOUGLAS  
Address: 2175 STATE RD 84  
City-St-Zip: FT LAUDERDALE, FL 33312

## 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:

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: RICHARD LOEHR

D

01/24/2003

Electronic Signature of Signing Officer or Director

Date