

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90161 037 ***150.00

REPORT FD

DOCUMENT # S76852

1. Entity Name
POLARIS ASSOCIATES, INC.



Principal Place of Business
2915 SR 590
SUITE 17
CLEARWATER FL 33759
US

Mailing Address
2915 SR 590
SUITE 17
CLEARWATER FL 33759
US



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3085869** Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DIEHL, JOHN O.
~~1419 EASTFIELD DR~~
~~CLEARWATER FL 34624~~

7. Name and Address of New Registered Agent
Name **JOHN O. DIEHL**
Street Address (P.O. Box Number is Not Acceptable) ~~386~~ **386 SHEFFIELD CIRCLE W**
City **PALM HARBOR** FL Zip Code **34683**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DIEHL, JOHN O. 1419 EASTFIELD DR CLEARWATER FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT 386 SHEFFIELD CIRCLE W. PALM HARBOR FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST FERRANS, DANIEL D. 1515 MICHIGAN AVE PALM HARBOR FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT DAN (H) RIZZUTO 5 HAMMOCK PLACE SAFETY HARBOR, FL 34695
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV RIZZUTO, DAN 2085 HOLIDAY DR HOLIDAY FL 34691	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT 3343 PATTIE PLACE PALM HARBOR FL 34685
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WEIGLE, JOHN D 415 STEEPLECHASE LANE PALM HARBOR FL 34684	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with my address, with all other like empowered.

SIGNATURE: DANIEL D. FERRANS DATE: 1-22-03 DAYTIME PHONE #: 727-669-0522

CR2E034 (10/02)