

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000079905

FILED
Jan 13, 2002 8:00 AM
Secretary of State

Entity Name: ACCUSKI, INC.

Current Principal Place of Business:

7620 LAKE MARSHA DR
ORLANDO, FL 32819 US

New Principal Place of Business:

11431 CLAYMONT CIRCLE
WINDERMERE, FL 37786 US

Current Mailing Address:

7620 LAKE MARSHA DR
ORLANDO, FL 32819 US

New Mailing Address:

11431 CLAYMONT CIRCLE
WINDERMERE, FL 34786 US

FEI Number: 59-3282917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGGARD, GUY S
301 EAST PINE ST.
SUITE 1400
ORLANDO, FL 32801 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HAGGARD, GUY S
Address: 301 E PINE ST STE 1400
City-St-Zip: ORLANDO, FL 32802

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: HAGGARD, GUY S
Address: 301 E PINE ST STE 1400
City-St-Zip: ORLANDO, FL 32802

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: GUY S. HAGGARD

P/D

01/13/2002

Electronic Signature of Signing Officer or Director

Date