

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 378875

FILED
Apr 09, 2002 8:00 AM
Secretary of State

Entity Name: DATA FINANCIAL, INC.

Current Principal Place of Business:

806 RIVERSIDE AVENUE
JACKSONVILLE, FL 32204 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2286
JACKSONVILLE, FL 32203 US

New Mailing Address:

FEI Number: 59-1346874 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, FRED C
806 RIVERSIDE AVENUE
JACKSONVILLE, FL 32203 US

Name and Address of New Registered Agent:

LUNETTA, PAUL J
806 RIVERSIDE AVENUE
JACKSONVILLE, FL 32204 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: PAUL J. LUNETTA

04/09/2002

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: C () Delete
Name: JACKSON, FRED C
Address: 806 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32203

Title: V () Delete
Name: FAISON, TERRY B
Address: 806 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32203 US

Title: V () Delete
Name: VOGEL, WILLIAM R
Address: 806 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32203 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LUNETTA, PAUL J
Address: 806 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: V (X) Change () Addition
Name: FAISON, T B
Address: 806 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: V (X) Change () Addition
Name: VOGEL, WILLIAM R
Address: 806 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: ST () Change (X) Addition
Name: FLYNN, MARY E
Address: 806 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32204 US

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: MARY E. FLYNN

ST

04/09/2002

Electronic Signature of Signing Officer or Director

Date