

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 476377

FILED
Jan 26, 2003
Secretary of State

Entity Name: SPIRAL CIRCLE, INC.

Current Principal Place of Business:

3900 MOCKINGBIRD LANE
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

3900 MOCKINGBIRD LANE
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 59-1594010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, WILLIAM Y.
3900 MOCKINGBIRD LANE
ORLANDO, FL

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: PD () Delete
Name: FORD, BEVERLY A.,
Address: 3900 MOCKINGBIRD LANE
City-St-Zip: ORLANDO, FL

Title: VD () Delete
Name: FORD, WILLIAM Y.,
Address: 3900 MOCKINGBIRD LANE
City-St-Zip: ORLANDO, FL

Title: ST () Delete
Name: FORD, WILLIAM Y.,
Address: 3900 MOCKINGBIRD LANE
City-St-Zip: ORLANDO, FL

Title: VP () Delete
Name: FORD, AMY K,
Address: 3139 E TIMBER CREST COVE
City-St-Zip: SANDY, UT 84093

Title: VP () Delete
Name: FORD, MARCUS Y
Address: 2519 AZALEA DRIVE
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FORD, BEVERLY A.,
Address: 3900 MOCKINGBIRD LANE
City-St-Zip: ORLANDO, FL 32803

Title: VD (X) Change () Addition
Name: FORD, WILLIAM Y.,
Address: 3900 MOCKINGBIRD LANE
City-St-Zip: ORLANDO, FL 32803

Title: ST (X) Change () Addition
Name: FORD, WILLIAM Y.,
Address: 3900 MOCKINGBIRD LANE
City-St-Zip: ORLANDO, FL 32803

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: BEVERLY A. FORD

PRES

01/26/2003

Electronic Signature of Signing Officer or Director

Date