

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000007025

FILED
Feb 06, 2003
Secretary of State

Entity Name: HANDEX OF NEW ENGLAND, INC.

Current Principal Place of Business:

398 CEDAR HILLS STREET
MARLBOROUGH, MA 01752

New Principal Place of Business:

Current Mailing Address:

30941 SUNEAGLE DR
MOUNT DORA, FL 32757

New Mailing Address:

FEI Number: 04-3024410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 E. PARK AVE.
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: EATMAN, ROGER
Address: 30941 SUNEAGLE DRIVE
City-St-Zip: MT. DORA, FL 327579784

Title: PD () Delete
Name: BANNON, GOERGE
Address: 30941 SUNEAGLE DRIVE
City-St-Zip: MT. DORA, FL 327579784

Title: VAS () Delete
Name: HEATH, IRVIN
Address: 30941 SUNEAGLE DRIVE
City-St-Zip: MT. DORA, FL 327579784

Title: S () Delete
Name: TABOR, WILLIAM E JR.
Address: 30941 SUNEAGLE DRIVE
City-St-Zip: MT. DORA, FL 327579784

Title: T () Delete
Name: MULLINS, WILLIAM P
Address: 30941 SUNEAGLE DRIVE
City-St-Zip: MT. DORA, FL 327579784

Title: AS () Delete
Name: BLOUT, VINCE
Address: 30941 SUNEAGLE DRIVE
City-St-Zip: MT. DORA, FL 327579784

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:

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: WILLIAM E TABOR, JR

S

02/06/2003

Electronic Signature of Signing Officer or Director

Date