

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F01000000193

1. Entity Name  
GETSMART.COM, INC.



FILED

03 MAR -7 PM 1:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
123 MISSION ST  
19TH FLOOR  
SAN FRANCISCO CA 94105

Mailing Address  
123 Mission Street  
19th Floor  
SAN FRANCISCO CA 94105

2. Principal Place of Business  
123 Mission Street  
Attn: Sean McCarthy, President  
Suite, Apt. #, etc.  
5th Floor

3. Mailing Address Attn: Corporate Secretary's Office  
201 Mission Street  
Suite, Apt. #, etc.  
28th Floor



☒ CHECK HERE IF MAKING CHANGES

City & State  
San Francisco, CA.

City & State  
San Francisco, CA.

4. FEI Number 77-0436948

Applied For  
Not Applicable

Zip  
94105

Country  
USA

Zip  
94105

Country  
USA

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

## 6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

100013638441  
03/07/03--01011--003 \*\*150.00

City

FL Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCEO WILCOX, WARREN 201 MISSION ST, 28TH FLR SAN FRANCISCO CA 94105	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, JAMES G 201 MISSION ST, 28TH FLR SAN FRANCISCO CA 94105	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVC SANFORD, DANIEL 201 MISSION ST, 28TH FLR SAN FRANCISCO CA 94105	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VGCS RICHEY, ELLEN 201 MISSION ST, 28TH FLR SAN FRANCISCO CA 94105	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT LAIDERMAN, RICHARD 201 MISSION ST, 10TH FL SAN FRANCISCO CA 94105	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ROJAS, DAYSI 201 MISSION ST, 28TH FL SAN FRANCISCO CA 94105	<input type="checkbox"/> Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman of the Board & Chief Executive Officer John A. Weber 123 Mission St., 19th Fl., San Francisco, CA. 94105	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Director) President Sean McCarthy 123 Mission Street, 5th Floor San Francisco, CA, 94105	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Director) Executive Vice President & Controller Daniel Sanford 201 Mission Street, 28th Floor San Francisco, CA. 94105	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President & Treasurer Richard Laiderman 201 Mission Street, 10th Floor San Francisco, CA. 94105	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President & Asst. Secretary Daysi Rojas 201 Mission Street, 28th Fl. San Francisco, CA. 94105	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 4, 2003 (415) 278-4744

Date

Daytime Phone #

CR2E034 (10/02)