

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000005056

FILED  
Apr 02, 2002 8:00 AM  
Secretary of State

**Entity Name:** CUSTOM PUBLISHING DESIGN GROUP, INC.

**Current Principal Place of Business:**

370 OSCEOLA AVENUE  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

370 OSCEOLA AVENUE  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

**FEI Number:** 06-1615779

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANTHONY, DAVE  
370 OSCEOLA AVE.  
JACKSONVILLE BEACH, FL 32250 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: PT ( ) Delete  
Name: HATCH, DOUGLAS  
Address: 1800 SILAS DEANE HWY, STE 168  
City-St-Zip: ROCKY HILL, CT

Title: VS ( ) Delete  
Name: LIZZIO, DAVID A  
Address: 370 OSCEOLA AVE.  
City-St-Zip: JACKSONVILLE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: HATCH, DOUGLAS  
Address: 1800 SILAS DEANE HWY, STE 168  
City-St-Zip: ROCKY HILL, CT 06067

Title: VS (X) Change ( ) Addition  
Name: LIZZIO, DAVID A  
Address: 370 OSCEOLA AVE.  
City-St-Zip: JACKSONVILLE, FL 32250

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:** DAVID A. LIZZIO

VS

04/02/2002

Electronic Signature of Signing Officer or Director

Date