

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F02000002028

FILED  
Jan 02, 2003  
Secretary of State

Entity Name: USA PROGRAM ADMINISTRATORS INC.

## Current Principal Place of Business:

7 FLOWERFIELD, STE. 28  
ST. JAMES, NY 11780

## New Principal Place of Business:

## Current Mailing Address:

7 FLOWERFIELD, STE. 28  
ST. JAMES, NY 11780

## New Mailing Address:

P.O. BOX 322  
ST. JAMES, NY 11780

FEI Number: 65-0791602

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: PD ( ) Delete  
Name: MILLER, ERIC L  
Address: 7 FLOWERFIELD, STE. 28  
City-St-Zip: ST. JAMES, NY 11780

Title: VPSD ( ) Delete  
Name: BARTHOLOMEW, ROBERT  
Address: 709 STOKES RD.  
City-St-Zip: MEDFORD, NJ 08055

Title: D ( ) Delete  
Name: MILLER, H. LINCOLN  
Address: 4424 CALLE SERRENA  
City-St-Zip: SARASOTA, FL 34238

## 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:

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: ERIC MILLER

PD

01/02/2003

Electronic Signature of Signing Officer or Director

Date