## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F02000002735

Entity Name: CLICKBASE CORPORATION

FILED Apr 29, 2003 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:
4600 TOUCHTON ROAD EAST, BL. 100, STE. 150 JACKSONVILLE, FL 32246		4600 TOUCHTON ROAD EAST BUILDING 100 - SUITE 150 JACKSONVILLE, FL 32246
Current M	lailing Address:	New Mailing Address:
	CHTON ROAD EAST, BL. 100, STE. 150 VILLE, FL 32246	4600 TOUCHTON ROAD EAST BUILDING 100 - SUITE 150 JACKSONVILLE, FL 32246
FEI Number	: 02-0585166 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired (X)
Name and	Address of Current Registered Agent	Name and Address of New Registered Agent:
1200 SOU	PORATION SYSTEM TH PINE ISLAND ROAD ION, FL 33324 US	
	named entity submits this statement for t e of Florida.	ne purpose of changing its registered office or registered agent, or both,
SIGNATUI	RE:	
	Electronic Signature of Registered	Agent Date
Election Car	mpaign Financing Trust Fund Contribution ( ).	
	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	PD ( ) Delete KLENNER, FRANK J 4600 TOUCHTON ROAD EAST, BL. 100, STE. 1 JACKSONVILLE, FL 32246	Title: ( ) Change ( ) Addition Name: 50 Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	DCEO ( ) Delete MILLS, WILLIAM H 4600 TOUCHTON ROAD EAST, BL. 100, STE. 1 JACKSONVILLE, FL 32246	Title: ( ) Change ( ) Addition Name: 50 Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	V ( ) Delete HESS, JOSEPH J 4600 TOUCHTON ROAD EAST, BL. 100, STE. 1 JACKSONVILLE, FL 32246	Title: ( ) Change ( ) Addition Name:  50 Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S ( ) Delete KOMER, THOMAS B 4600 TOUCHTON ROAD EAST, BL. 100, STE. 1 JACKSONVILLE, FL 32246	Title: ( ) Change ( ) Addition Name: 50 Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	V (X) Delete SHERIDAN, SUSAN 4600 TOUCHTON ROAD EAST, BL. 100, STE. JACKSONVILLE, FL 32246	Title: ( ) Change ( ) Addition Name: 50 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: FRANK KLENNER PD 04/29/2003