2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F02000003891

7070 POLO DRIVE

CUMMINGS, GA 30040

Address: City-St-Zip:

Entity Name: CREW ONE FLORIDA, INC.

FILED Feb 24, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2179 MORRIS AVENUE, SUITE C TUCKER, GA 300844500 **Current Mailing Address: New Mailing Address:** 11100 ASTRONAUT BLVD., SUITE 300 ORLANDO, FL 328379202 FEI Number: 05-0523374 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STEWART, CROOK 1729 BIG OAK LANE KISSIMMEE, FL 34746 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition JACKSON, JEFFREY Name: Name: 2879 ROTHERWOOD DRIVE Address: Address: City-St-Zip: TUCKER, GA 300842624 City-St-Zip: Title: Title: () Delete () Change () Addition Name: JUMPER, S. BEN Name: 1093 RED BELT ROAD Address: Address: CHICKAMAUGA, GA 30707 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition WAYNE, JOHN PAUL Name: Name: 3826 LOCH HIGHLAND PARKWAY Address: Address: City-St-Zip: ROSWELL, GA 30075 City-St-Zip: Title: () Delete Title: () Change () Addition STEWART, CROOK Name: Name: Address: 1729 BIG OAK LANE Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: Title: Title: () Delete () Change () Addition BRUSCO, CHARLIE D Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: CROOK STEWART S 02/24/2003