

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F22945

FILED  
Apr 14, 2003  
Secretary of State

**Entity Name:** ATLANTIC DATAFURNITURE PRODUCTS, INC.

**Current Principal Place of Business:**

5202 EAGLE TRAIL DIRVE  
TAMPA, FL 33634 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 151777  
TAMPA, FL 33684 US

**New Mailing Address:**

**FEI Number:** 59-2073983

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MESSERMAN, JEROME  
5202 EAGLE TRAIL DRIVE  
TAMPA, FL 33634

**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: D (X) Delete  
Name: VAN VELDHUIZEN, JOHN  
Address: 1717 ANGLERS COURT  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DP ( ) Delete  
Name: MESSERMAN, JEROME  
Address: 5202 EAGLE TRAIL DRIVE  
City-St-Zip: TAMPA, FL 33634

Title: DV ( ) Delete  
Name: MESSERMAN, BRUCE  
Address: 17906 SPENCER RD  
City-St-Zip: ODESSA, FL 33556

**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: JEROME MESSERMAN

DP

04/14/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date