
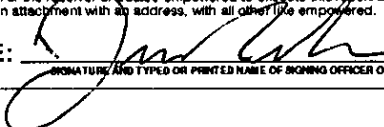


FILED
May 29, 2003 8:00 am
Secretary of State

05-29-2003 90140 015 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

80122835

DOCUMENT # F52719					
1. Entity Name NELSON'S LOUNGE AND DISCOUNT PACKAGE STORE, INC.					
Principal Place of Business 2526 GULF BEACH HIGHWAY PENSACOLA, FL 32507			Mailing Address 2526 GULF BEACH HIGHWAY PENSACOLA, FL 32507		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 59-2137813				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
WILBORN, KATHERINE X., C.P.A., P.A. 6012 TIPPIN AVE PENSACOLA, FL 32504				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent's signature required when substituting) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
P NELSON, JERRY 7560 CASA GRANDE CL MILTON, FL 32583			Delete <input type="checkbox"/>		
V NELSON, CLAUDIA 7560 CASA GRANDE CI MILTON, FL 32583			Delete <input type="checkbox"/>		
Delete <input type="checkbox"/>			Delete <input type="checkbox"/>		
Delete <input type="checkbox"/>			Delete <input type="checkbox"/>		
Delete <input type="checkbox"/>			Delete <input type="checkbox"/>		
Delete <input type="checkbox"/>			Delete <input type="checkbox"/>		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  5/22/03 (850) 457-3664					

CR2E034 (10/02)