2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F94000002247

Entity Name: BULLOCK, SMITH AND PARTNERS, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
306 WEST DEPOT AVE. KNOXVILLE, TN 37917					
Current Mailing Address:			New Mailing Address:		
306 WEST DEPOT AVE. SUITE 201 KNOXVILLE, TN 379177522					
FEI Number: 62-1193455 FEI Number Applied For () FEI N		FEI Number Not Appl	clicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SMITH, CHARLES D JR. 513 1/2 AMELIA STREET ORLANDO, FL 32803 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: Name: Address: City-St-Zip:	DV () E ENDSLEY, JOHN 306 WEST DEPO KNOXVILLE, TN	т	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DC () E SMITH, CHARLES 306 WEST DEPO KNOXVILLE, TN	т	Title: Name: Address: City-St-Zip:	DC (X) Change () Addition SMITH, CHARLES D 306 WEST DEPOT KNOXVILLE, TN 37917	
Title: Name: Address: City-St-Zip:	DPT () E WHITE, STEPHE 300 9TH AVE SO KNOXVILLE, TN	UTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () E HAUSMAN, CRAIG 300 9TH AVENUE KNOXVILLE, TN	G G E SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV ()E HAYES, P. MICHA 306 WEST DEPO KNOXVILLE, TN	OT AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E PALKO, PAUL F 306 WEST DEPO KNOXVILLE, TN		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: CHARLES D. SMITH DC 04/30/2003

CURTIS E. CATRON, DIRECTOR 306 WEST DEPOT AVENUE, SUITE 201 KNOXVILLE, TN 37917

KENNETH M. MOFFETT, SECRETARY 306 WEST DEPOT AVENUE, SUITE 201 KNOXVILLE, TN 37917

DAVID L. FORKNER, SR. V.P. 306 WEST DEPOT AVENUE, SUITE 201 KNOXVILLE, TN 37917

DAVID L. FORKNER, SR. V.P. 306 WEST DEPOT AVENUE, SUITE 201