2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F95000001154

Entity Name: STATCORP, INC.

FILED Feb 24, 2003 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
14476 DU\ STE 303 JACKSON	/AL PL W VILLE, FL 322	18 US				
	ailing Addres		New Maili	ng Address:		
	_					
14476 DU\ STE 303						
JACKSON	VILLE, FL 322	18 US				
FEI Number:	62-1377355	FEI Number Applied For ()	FEI Number Not App	licable () Cer	tificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New	Registered Agent:	
1201 HAYS SUITE 102	SST.	ORPORATION SYSTEM, INC).			
	named entity s e of Florida.	submits this statement for the	purpose of changing i	ts registered office	or registered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
Election Car	nnaign Einancing	Truet Fund Contribution ()				
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SHEPHERD, JA	WEALTH AVENUE, SUITE 8B	Title: Name: Address: City-St-Zip:	PD (X) Cha SHEPHERD, JAMES 1335 BEACH AVENU ATLANTIC BEACH, F	JE	
Title: Name: Address: City-St-Zip:	HALL, ROGER	WEALTH AVENUE, SUITE 8B	Title: Name: Address: City-St-Zip:	VD (X) Cha HALL, ROGER J. 2312 RANGE CRES ORANGE PARK, FL		
Title: Name: Address: City-St-Zip:	SD () WOODS, ANDY 1977 CRAIGMO CLARKSVILLE,	NT BLVD.	Title: Name: Address: City-St-Zip:	()Cha	nge () Addition	
Title: Name: Address: City-St-Zip:	TD () CROSBY, ROBI 211 LEWISBUR FRANKLIN, TN		Title: Name: Address: City-St-Zip:	()Cha	nge () 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: JAMES M SHEPHERD PD 02/24/2003