

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F96000002824

FILED
Jan 30, 2003
Secretary of State

Entity Name: WARD & WHITEMORE UNIVERSAL FIRE CONSULTANTS, INC.

Current Principal Place of Business:

PO BOX 475
PRIOR LAKE, MN 55372

New Principal Place of Business:

PO BOX 548
PRIOR LAKE, MN 55372

Current Mailing Address:

PO BOX 475
PRIOR LAKE, MN 55372

New Mailing Address:

PO BOX 548
PRIOR LAKE, MN 55372

FEI Number: 41-1827463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARD, JACK A
422 S THIRD ST
JACKSONVILLE BEACH, FL 32250 US

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: VP () Delete
Name: WARD, JACK A
Address: 3985 CATTAIL POND CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL

Title: P () Delete
Name: WHITEMORE, ROBERT B
Address: 6610 E 240TH ST
City-St-Zip: ELKO, MN 55020

Title: SD () Delete
Name: WARD, DIXIE
Address: 3985 CATTAIL POND CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL

Title: PT () Delete
Name: WHITEMORE, PAM
Address: 6610 E 240TH ST
City-St-Zip: ELKO, MN 55020

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:

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: PAMELA A. WHITEMORE

TREA

01/30/2003

Electronic Signature of Signing Officer or Director

Date