

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F98000006282

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: TRADE REPORTING AND DATA EXCHANGE, INC.

Current Principal Place of Business:

4805 WEST LAUREL
SUITE 300
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

4805 WEST LAUREL
SUITE 300
TAMPA, FL 33607

New Mailing Address:

FEI Number: 91-1106681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODWIN, JAMES W
400 N. TAMPA ST, SUITE 2300
TAMPA, FL 33602 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GORDON, THOMAS G JR
Address: 2755 CAMPUS DR
City-St-Zip: SAN MATEO, CA 944032513

Title: D () Delete
Name: BAKER, LEN
Address: 755 PAGE MILL RD
City-St-Zip: PALO ALTO, CA 94304

Title: D () Delete
Name: DOMINIK, DAVID
Address: TWO COPLEY PLACE
City-St-Zip: BOSTON, MA 02116

Title: D () Delete
Name: KONTAGOURIS, VENETIA
Address: 200 NYALA FARMS RD
City-St-Zip: WESTPORT, CT 06880

Title: D () Delete
Name: MUNDELL, BILL
Address: 200 AVENUE OF THE STARS #1405
City-St-Zip: LOS ANGELES, CA 90067

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:

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: THOMAS G GORDON JR

PRES

04/29/2002

Electronic Signature of Signing Officer or Director

Date