

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F98000006285

FILED
Mar 03, 2003
Secretary of State

Entity Name: GOVCONNECT, INC.

Current Principal Place of Business:

11311 CORNELL PARK DRIVE
STE 300
CINCINNATI, OH 45242

New Principal Place of Business:

Current Mailing Address:

11311 CORNELL PARK DRIVE
STE 300
CINCINNATI, OH 45242

New Mailing Address:

FEI Number: 59-2957887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CEOP () Delete
Name: FOX, JAMES L
Address: 11311 CORNELL PARK DRIVE STE 300
City-St-Zip: CINCINNATI, OH 45242

Title: VP () Delete
Name: DOTY, PAUL
Address: 11311 CORNELL PARK DRIVE
City-St-Zip: CINCINNATI, OH 45242

Title: VP () Delete
Name: FICKE, BRUCE
Address: 11311 CORNELL PARK DRIVE
City-St-Zip: CINCINNATI, OH 45242

Title: S () Delete
Name: GOWEN, MARY PAT
Address: 11311 CORNELL PARK DRIVE
City-St-Zip: CINCINNATI, OH 45242

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: S (X) Change () Addition
Name: GOLDEN, MARY PAT
Address: 11311 CORNELL PARK DRIVE
City-St-Zip: CINCINNATI, OH 45242

Title: DIR () Change (X) Addition
Name: FOX, JAMES L
Address: 11311 CORNELL PARK DRIVE
City-St-Zip: CINCINNATI, OH 45242

Title: DIR () Change (X) Addition
Name: TREINEN, DAVID J
Address: 11311 CORNELL PARK DRIVE
City-St-Zip: CINCINNATI, OH 45242

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: BRUCE FICKE

VP

03/03/2003

Electronic Signature of Signing Officer or Director

Date