2002 UNIFORM BUSINESS REPORT (UBR)					FII Fab 12-20	ED 3	
DOCUMENT # 1. Entity Name					Feb 12, 2002 8:00 am		
EXIGENT SOLUTIONS GROUP, INC. 02-12-2002 90036 001 ***300.00							
Principal Place of Business		Mailing Address					
C/O EXIGENT INTERNATIONAL 1225 EVANS ROAD MELBOURNE FL 32904	1830 PENN ST MELBOURNE FL 32901				14041		
2. Principal Place of Business		3. Mailing Address /					
1025 W. NAS Suite, Apt. #, etc.	1025 W. NASA BLVD. Suite, Apt. #, etc.		D.	DO NOT WRITE IN THIS SPACE			
		City & State MEZBOURNE, FL		4.	FEI Number 56-2166961	Applied For Not Applicable	
32919	USA	Zip 32919		_	Certificate of Status Desired	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent Name				
CORPORATION SERVICE COMPANY 1201 HAYS STREET			Street Address (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32301-2525			City	ty FL Zip Code			
8. 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							
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS Tax filing requirement and elects to do so. After May 1, 2002 Fee w (See criteria on back) Make Check Payable to Dep				00	10. Election Campaign Financing Trust Fund Contribution.		
11.	OFFICERS AND DI		12.	A[DITIONS/CHANGES TO OFFICERS		
TITLE DP NAME DENNIS, GLE STREET ADDRESS CITY-ST-ZIP GAMBRILLS N	lff Dr	🔀 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1025	B.R. W. NASA BLVD.	Change Addition	
TITLE TD NAME BALL, SALLY	10 21034	Z Delete	TITLE	VTD	50URNEJ FL 329 RMAN, D.S.	L9 ISQ. Change □ Addition	
STREET ADDRESS 1224 MIRA VI CITY-ST-ZIP MELBOURNE			STREET ADDRESS City-St-Zip	SAN	NE AB ABOVE		
TITLE DS			TITLE NAME STREET ADDRESS	NC			
1000 1100101	SATELLITE BEACH FL 32937			SAN	SAME AS ABOVE		
STREET ADDRESS 295 HIGHWA	SMEDLEY, B R 295 HIGHWAY A1A, #205		TITLE NAME STREET ADDRESS		SALLANTYNE, R.L. & Change Addition SALLANTYNE, R.L. & Change Addition SAME AS ABOVE		
CITY-ST-ZIP SATELLITE BI	EACH FL 32937	Delete	CITY-ST-ZIP			Change 🔲 Addition	
NAME STREET ADDRESS CITY - ST - ZIP			NAME STREET ADDRESS CITY - ST - ZIP	MIKU	SAME AS ABOVE		
TITLE NAME STREET ADDRESS		Delete	TITLE NAME STREET ADDRESS	AT GREET	E AS ABOUE VE, CHARLES J. E AS ABOVE	Change Addition	
CITY-ST-ZIP	rmotion openational with at	in filing close not av-16. ()	CITY-ST-ZIP				
13. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIFFECTOR							