

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 28, 2003 8:00 am**  
**Secretary of State**

0017343

DOCUMENT # **F99000003939**

1. Entity Name

**UNITED BUYERS ASSOCIATION, INC.**



07-28-2003 90137 010 \*\*\*\*61.25

Principal Place of Business

~~300 N. COIT ROAD, STE 1050  
RICHARDSON TX 75080~~

Mailing Address

**300 N. COIT ROAD, STE 1050  
RICHARDSON TX 75080**

2. Principal Place of Business

**1200 G STREET, NW**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**WASHINGTON, D.C.**

City & State

4. FEI Number **75-2516487**

Applied For

Not Applicable

Zip

**20005**

Country

**USA**

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~KATOSIC, PAUL AX~~

~~X 2910 GOLDEN PANTHER DR, UNIT 4 X  
X ESTERO FL 33928~~

Name

**KATOSIC, PAUL A.**

Street Address (P.O. Box Number is Not Acceptable)

**20680 FRUITFUL DRIVE**

City

**ESTERO**

**FL**

Zip Code

**33928**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Paul A. Katosic*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**7/17/03**

DATE

**FILE NOW: FEE IS \$61.25  
After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  Delete  
NAME ~~PR FORRESTER, DOUGLAS R.~~  
STREET ADDRESS ~~300 N. COIT RD, STE 1050~~  
CITY-ST-ZIP ~~RICHARDSON TX 75080~~

TITLE  Change  Addition  
NAME **PD FORRESTER, DOUGLAS R.**  
STREET ADDRESS **35 BERKSHIRE DRIVE**  
CITY-ST-ZIP **PRINCETON, NEW JERSEY 08550**

TITLE  Delete  
NAME ~~ULLMAN, RICHARD O.~~  
STREET ADDRESS ~~1360 HAMBURG TURNPIKE~~  
CITY-ST-ZIP ~~WAYNE, NEW JERSEY 07470~~

TITLE  Change  Addition  
NAME **VPD ULLMAN, RICHARD O.**  
STREET ADDRESS **1360 HAMBURG TURNPIKE**  
CITY-ST-ZIP **WAYNE, NEW JERSEY 07470**

TITLE  Delete  
NAME ~~FRANCESONE, BART~~  
STREET ADDRESS ~~18 LONG ACRE DRIVE~~  
CITY-ST-ZIP ~~CREAM RIDGE, NEW JERSEY 08514~~

TITLE  Change  Addition  
NAME **STD. FRANCESONE, BART**  
STREET ADDRESS **18 LONG ACRE DRIVE**  
CITY-ST-ZIP **CREAM RIDGE, NEW JERSEY 08514**

TITLE  Delete  
NAME ~~FRANCESONE, BART~~  
STREET ADDRESS ~~300 N. COIT RD, STE 1050~~  
CITY-ST-ZIP ~~RICHARDSON TX 75080~~

TITLE  Change  Addition  
NAME **VPD MARSHALL, JOHN D.**  
STREET ADDRESS **180 FRANKLIN COURT ROAD, APT. J13**  
CITY-ST-ZIP **LAWRENCEVILLE, NEW JERSEY 08648**

TITLE  Delete

TITLE  Change  Addition

TITLE  Delete

TITLE  Change  Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*George J. Hines*

**7/17/03 977/664-9170**

CR2E037 (4/03)