

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G04234

FILED
Feb 20, 2003
Secretary of State

Entity Name: SENTINEL MOVERS, INC.

Current Principal Place of Business:

4031 NAVY BLVD
P.O. BOX 4098
PENSACOLA, FL 325071222

New Principal Place of Business:

Current Mailing Address:

4031 NAVY BLVD
P.O. BOX 4098
PENSACOLA, FL 325071222

New Mailing Address:

FEI Number: 59-2249856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUAL, LEE T.
4031 NAVY BLVD.
PENSACOLA, FL 32507

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: PD () Delete
Name: HUAL, LEMOYNE T,
Address: 4031 NAVY BLVD
City-St-Zip: PENSACOLA, FL 32507

Title: ST () Delete
Name: HUAL, DONNA Y.
Address: 10714 LILLIAN HWY
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HUAL, LEMOYNE T
Address: 4031 NAVY BLVD
City-St-Zip: PENSACOLA, FL 32507

Title: ST (X) Change () Addition
Name: HUAL, DONNA Y
Address: 10714 LILLIAN HWY
City-St-Zip: PENSACOLA, FL 32506

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: LEMOYNE T. HUAL

PD

02/20/2003

Electronic Signature of Signing Officer or Director

Date