## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# G11665

FILED Feb 19, 2003 Secretary of State

Entity Name: TICKNOR ENTERPRISES, INC.

urrent Principal Place of Business:			New Principal Place	New Principal Place of Business:	
15 KINGS AKE PLAG	SCT NW CID, FL 33852	US			
urrent M	ailing Address	:	New Mailing Addre	ss:	
15 KINGS AKE PLAG	S CT NW CID, FL 33852	US			
El Number:	59-2331610	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
ame and	Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:	
IIAMI, FL	33166				
the State	e of Florida.	ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
	e of Florida. RE:	ubmits this statement for the p		ed office or registered agent, or both,  Date	
the State	e of Florida.  RE: Electronic  npaign Financing	c Signature of Registered Ago  Trust Fund Contribution ( ).	ent	Date	
the State	e of Florida.  RE: Electronic	c Signature of Registered Ago  Trust Fund Contribution ( ).	ent		
the State	e of Florida.  RE:  Electronic  npaign Financing  S AND DIRECT	C Signature of Registered Ago  Trust Fund Contribution ( ).  ORS:  Delete IA L.  W	ent	Date	
the State IGNATUR  ection Can FFICERS tle: ame: ddress:	e of Florida.  RE: Electronic  npaign Financing S AND DIRECT  PD () II  TICKNOR, DONN 115 KINGS CT N LAKE PLACID, F	C Signature of Registered Ago  Trust Fund Contribution ( ).  ORS:  Delete IA L.  W L  Delete ARD W.	ADDITIONS/CHANG Title: Name: Address:	Date  BES TO OFFICERS AND DIRECTORS	

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:	DONNA L. TICKNOR	PD	02/19/2003
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