## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G53281

FILED Apr 29, 2003 Secretary of State

Entity Name: LIFE INSURANCE SCHOOL OF FLORIDA, INC.

Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
8726 OLD CR 54 SUITE B				
NEW PORT RICHEY,	FL 34653 US			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
96 SE 6TH AVENUE SUITE 1				
DELRAY BEACH, FL	33483? US			
FEI Number: 59-2318921	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Addre			New Registered Agent:	
BARRETT, EDWARD J 96 SE 6TH AVENUE SUITE 1 DELRAY BEACH, FL 33483				
The above named entition the State of Florida.	ty submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		nt	Date	
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Name: BARRETT, E Address: 401 NE MIZI	( ) Delete EDWARD J NER BLVD. PH901 N, FL 33432	Title: ( Name: Address: City-St-Zip:	()Change ()Addition	

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: EDWARD J. BARRETT PRES 04/29/2003