2002 UNIFORM BUSINESS REPORT (UBR)

DOCU 1. Entity Nam	2 UNIFORM BUSING MENT # G59174 CONSOLIDATED INVESTMENT	1	RT	(UBR)		Feb 13, 2 Secreta 02-13-2002	ry o	8:0 f Sta	ate	
Principal Place of Business 25 WALTER MARTIN AVE#202 P.O.BOX 2259 FORT WALTON BEACH FL 32548 Mailing Address 25 WALTER MARTIN AVE#20 P.O.BOX 2259 FORT WALTON BEACH FL 32548										
Principal Place of Business 3. Mailing Address						[#8]	ii 6 101 81811 818))	<u>/FBIL D/BII 1981</u>	
Suite, Apt. #, etc. Suite, Apt. #, e			tc.			DO NOT WRITE IN THIS SPACE				
City & State City & State					4.	FEI Number 59-2413283		_ 	oplied For	
Zip	Country	Zip Count		try	5. (Certificate of Status Desired		8.75 Add	ditional	
	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
MEAD, MICHAEL WM. 24 WALTER MARTIN ROAD FORT WALTON BEACH FL 32548				Name Street Address (P.O. Box Number is Not Acceptable)						
TONI WA	LION BEACH & E 32040			City			FL	Zip Cod	e	
Tax filing r	Signature, typed or printed name of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW! After May 1, 200 Make Check Payab	!! FEE 02 Fee	will be \$550.0	00	10. Election Campaign Fin Trust Fund Contribution			May Be	
11.	OFFICERS AND DIF	RECTORS	12.	···	AD	DITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11	
TITLE .• NAME STREET ADDRESS CITY-ST-ZIP	P SHELLEY, G. GLENN 111 YACHT CLUB DR. FORT WALTON BCH FL	☐ Delete						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MEAD, MICHAEL WM 24 WALTER MARTIN RD FT WALTON BCH FL	☐ Delete						Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	THE TOTAL CONTROL OF THE PARTY	☐ Delete			 -		-	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete					,	☐ Change	Addition	
TITLE NAME STREET ADDRESS (CITY-ST-ZIP		☐ Delete	1	1				Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Change	Addition	
indicated of the con	tertify that the information supplied with this on this report or supplemental report is tru poration or the receiver or trustee empower or on an attachment with an address, with	e and accurate and that made and that made and the execute this report a	ıy signat	ure shall have t	the same I	egal effect as if made under o	ath; that I an	n an officer	or director	