

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H22163

FILED
Mar 31, 2003
Secretary of State

Entity Name: PALM BEACH LIFTS, INC.

Current Principal Place of Business:

C/O JERAULD W. CARRON, III
1748 AUSTRALIAN AVE., #14
RIVIERA, FL 33404

New Principal Place of Business:

Current Mailing Address:

C/O JERAULD W. CARRON, III
1748 AUSTRALIAN AVE., #14
RIVIERA, FL 33404

New Mailing Address:

FEI Number: 59-2656704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARRON, JERAULD W., III
841 ANCHORAGE DRIVE NORTH
NORTH PALM BEACH, FL 33408

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: CARRON, JERAULD W., III
Address: 841 ANCHORAGE DR
City-St-Zip: N PALM BCH, FL

Title: V () Delete
Name: CARRON, JERAULD W., IV
Address: 2563 PEPPERWOOD CIRCLE N
City-St-Zip: WEST PALM BEACH, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JERAULD W. CARRON III

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03/31/2003

Electronic Signature of Signing Officer or Director

_____ Date