2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J59774

FILED Apr 15, 2003 Secretary of State

Entity Name: KP ALLEN AND ASSOCIATES OF FLORIDA, INC.

| Current Principal Place of Business: | | | New Prince | New Principal Place of Business: | | |
|--|--|---|--------------------------------|--|------|--|
| 2600 LAKE SUITE 235 | LUCIEN DRI\ | /E | | | | |
| |), FL 32571 | | | | | |
| Current Mailing Address: | | New Mailing Address: | | | | |
| SUITE 235 | ELUCIEN DRIN), FL 32571 | /E | | | | |
| FEI Number: | 59-2780158 | FEI Number Applied For () | FEI Number Not App | licable () Certificate of Status Desired () | | |
| Name and | Address of C | urrent Registered Agent: | Name and | Address of New Registered Agent: | | |
| SUITE 235 MAITLAND |), FL 32571 U | S | | | | |
| | named entity s of Florida. | submits this statement for the p | ourpose of changing | its registered office or registered agent, or bo | th, | |
| | of Florida. | submits this statement for the p | ourpose of changing | its registered office or registered agent, or bo | oth, | |
| n the State | of Florida. RE: | submits this statement for the position in the position is signature of Registered Age | | its registered office or registered agent, or bo Date | oth, | |
| n the State SIGNATUF | of Florida. RE: Electron | ic Signature of Registered Age | | | oth, | |
| n the State SIGNATUF Election Can | of Florida. RE: Electron | ic Signature of Registered Age Trust Fund Contribution (). | ent | | | |
| n the State SIGNATUF Election Can | e of Florida. RE: Electron mpaign Financing S AND DIREC CEOD () MULLARKEY, M | ic Signature of Registered Age 7 Trust Fund Contribution (). TORS: Delete MICHAEL DIEN DRIVE STE 235 | ent | Date | | |
| n the State SIGNATUR Election Can OFFICERS Fitle: Name: Address: | e of Florida. RE: Electron AND DIREC CEOD () MULLARKEY, N 2600 LAKE LUC MAITLAND, FL VPGM () PADGETT, DAV | ic Signature of Registered Age g Trust Fund Contribution (). TORS: Delete MICHAEL CIEN DRIVE STE 235 32571 US Delete ID V CIEN DRIVE STE 235 | ADDITION Title: Name: Address: | Date NS/CHANGES TO OFFICERS AND DIRECT | | |

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: PAUL HAGGARD CFO 04/15/2003