

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J74887

FILED
Apr 30, 2003
Secretary of State

Entity Name: COR/PRO, INC.

Current Principal Place of Business:

P.O.BOX 1974
PONTE VEDRA BEACH, FL 320041974

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 1974
PONTE VEDRA BEACH, FL 320041974

New Mailing Address:

FEI Number: 59-2818807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LISTON, PHILIP J.
924 PONTE VEDRA BLVD
PONTE VEDRA BCH., FL 32082

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: DP () Delete
Name: LISTON, PHILIP J.,
Address: 924 PONTE VEDRA BLVD
City-St-Zip: PONTE VEDRA BCH., FL

Title: VPS () Delete
Name: LISTON, PARTICIA E.,
Address: 924 PONTE VEDRA BLVD
City-St-Zip: PONTE VEDRA BCH., FL

Title: T () Delete
Name: LISTON, PEGEEN
Address: 185 BERMUDA CT.
City-St-Zip: PONTE VEDRA BCH., FL

Title: VP () Delete
Name: LISTON, CALIN
Address: PO BOX 1974
City-St-Zip: PONTE VERDE, FL 32004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VP (X) Change () Addition
Name: LISTON, COLIN
Address: PO BOX 1974
City-St-Zip: PONTE VERDA, FL 32004

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: COLIN LISTON

VP

04/30/2003

Electronic Signature of Signing Officer or Director

Date