

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000006629

FILED  
Apr 29, 2003  
Secretary of State

Entity Name: REAL ESTATE CLEARINGHOUSE INTERNATIONAL, INC.

**Current Principal Place of Business:**

4790 W. COMMERCIAL BLVD.  
TAMARAC, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

4790 W. COMMERCIAL BLVD.  
TAMARAC, FL 33319

**New Mailing Address:**

FEI Number: 26-0037394

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NELSON, CARLTON  
4790 W. COMMERCIAL BLVD.  
TAMARAC, FL 33319 US

**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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: NELSON, CARLTON  
Address: 4790 W. COMMERCIAL BLVD.  
City-St-Zip: TAMARAC, FL 33319

Title: D ( ) Delete  
Name: CUNHA, CARMEN  
Address: 4790 W. COMMERCIAL BLVD.  
City-St-Zip: TAMARAC, FL 33319

Title: T ( ) Delete  
Name: PURCELL, JAMES  
Address: 4790 W. COMMERCIAL BLVD.  
City-St-Zip: TAMARAC, FL 33319

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T (X) Change ( ) Addition  
Name: MADISON RIVER CORPOR, ATION  
Address: 4790 W. COMMERCIAL BLVD.  
City-St-Zip: TAMARAC, FL 33319

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLTON NELSON

D

04/29/2003

Electronic Signature of Signing Officer or Director

Date