2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2003
Secretary of State

DOCUMENT# N01253

Entity Name: STELLA MARIS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1342 SE 46TH LANE
CAPE CORAL, FL 33904 US

New Principal Place of Business:

%PROFESSIONALLY YOURS INC
1342 SE 46TH LANE
CAPE CORAL, FL 33904 US

Current Mailing Address:

PO BOX 100831
CAPE CORAL, FL 33910

New Mailing Address:

%PROFESSIONALLY YOURS INC
PO BOX 100831
CAPE CORAL, FL 33910 US

FEI Number: 59-2531508 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLSON, BARBARA
1342 SE 46TH LANE
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

CAMPBELL, PHILIP
PROFESSINALLY YOURS INC
1342 SE 46TH LANE
CAPE CORAL, FL 33904 US

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: PHILIP CAMPBELL 05/10/2003
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CLODAGH, GARRY
Address: 5255 CORONADO PKWY #10
City-St-Zip: CAPE CORAL, FL 33904

Title: STD ( ) Delete
Name: FOX, JOEL
Address: 5255 CORONADO PARKWAY #1
City-St-Zip: CAPE CORAL, FL 33904

Title: VD ( ) Delete
Name: FODDEN, EDIE
Address: 5255 CORONADO PARKWAY #10
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CLODAGH, GARRY
Address: 5255 CORONADO PKWY #10
City-St-Zip: CAPE CORAL, FL 33904 US

Title: STD (X) Change ( ) Addition
Name: FOX, JOEL
Address: 5255 CORONADO PARKWAY #1
City-St-Zip: CAPE CORAL, FL 33904 US

Title: VD (X) Change ( ) Addition
Name: FODDEN, EDIE
Address: 5255 CORONADO PARKWAY #10
City-St-Zip: CAPE CORAL, FL 33904 US

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: CLODAGH GARRY PD 05/10/2003
Electronic Signature of Signing Officer or Director Date