2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000000362

Entity Name: MATURE TRAVELERS NETWORK, INC

FILED Apr 05, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2618 COVE CAY **UNIT 101** CLEARWATER, FL 33760 **New Mailing Address: Current Mailing Address:** 2618 COVE CAY **UNIT 101** CLEARWATER, FL 33760 FEI Number: 81-0578129 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CURRY, ROBIN J 2618 CÓVE CAY **UNIT 101** CLEARWATER, FL 33760 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition CURRY, ROBIN J P Name: Name: Address: Address: 2618 COVE CAY 101 City-St-Zip: City-St-Zip: CLEARWATER, FL 33760 US Title: Title: () Change (X) Addition () Delete CURRY, PATRICK A V Name: Name: Address: Address: 4150 SUMMITT City-St-Zip: City-St-Zip: MARIETTA, GA 30068 US Title: () Delete Title: () Change (X) Addition CURRY, ROSE M S/T Name: Name: 2618 COVE CAY 101 Address: Address: City-St-Zip: City-St-Zip: CLEARWATER, FL 33760 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: ROBIN J CURRY D 04/05/2003