2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003
Secretary of State

DOCUMENT# N02000006589

Entity Name: FLORIDA CADET CORPORATION

Current Principal Place of Business:

514 WEST PLAZA PLACE
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

514 WEST PLAZA PLACE
TAMPA, FL 33602

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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:	P	( ) Delete
Name:	MCFARLAND, MICHAEL	
Address:	514 WEST PLAZA PLACE	
City-St-Zip:	TAMPA, FL 33602	
Title:	VT	( ) Delete
Name:	ELLIS, GEORGE	
Address:	514 WEST PLAZA PLACE	
City-St-Zip:	TAMPA, FL 33602	
Title:	S	( ) Delete
Name:	JONES, FRANKIE	
Address:	514 WEST PLAZA PLACE	
City-St-Zip:	TAMPA, FL 33602	
Title:	D	( ) Delete
Name:	BROOKIN, ANDRETTA	
Address:	514 WEST PLAZA PLACE	
City-St-Zip:	TAMPA, FL 33602	
Title:	D	( ) Delete
Name:	BALDWIN, CHARLES W REV.	
Address:	514 WEST PLAZA PLACE	
City-St-Zip:	TAMPA, FL 33602	
Title:	D	( ) Delete
Name:	JONES, FRANKIE	
Address:	514 WEST PLAZA PLACE	
City-St-Zip:	TAMPA, FL 33602	

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:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	BALDWIN, CARLEE W REV.	
Address:	514 WEST PLAZA PLACE	
City-St-Zip:	TAMPA, FL 33602	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: GEORGE ELLIS VT 05/01/2003
Electronic Signature of Signing Officer or Director — Date