

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 25, 2003 8:00 am
Secretary of State

03-25-2003 90068 020 ****61.25

DOCUMENT # N38307

1. Entity Name

GET UNIFIED NOW POLITICAL ACTION COMMITTEE, INC.



Principal Place of Business

**C/O KENNETH S. BEALL, JR.
777 S. FLAGLER DR. #500 EAST
WEST PALM BEACH FL 33401**

Mailing Address

**C/O KENNETH S. BEALL, JR.
777 S. FLAGLER DR. #500 EAST
WEST PALM BEACH FL 33401**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0216116**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**LEMIEUX, GEORGE
777 S. FLAGLER DRIVE
SUITE 500E
WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent

Name **ERNEST A. COX, III**
Street Address (P.O. Box Number is Not Acceptable) **777 S. FLAGLER DR #500E**
City **WEST PALM BEACH** FL Zip Code **33401**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

2/27/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	O	<input type="checkbox"/> Delete
NAME	COX, ERNEST A III	
STREET ADDRESS	777 S FLAGLER DR #500 E	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	BRINDELL, JAMES R.	
STREET ADDRESS	777 S FLAGLER DR #500 E	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	CARMODY, JOHN T., JR.	
STREET ADDRESS	10 CENTRAL PKWY #400	
CITY-ST-ZIP	STUART FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	HALL, D	
STREET ADDRESS	500 E BROWARD BLVD., SUITE 1400	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	LE MIEUX, GEORGE	
STREET ADDRESS	777 S. FLAGLER DRIVE SUITE 500 E	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	ST	<input type="checkbox"/> Delete
NAME	SNOWDEN, DAVID	
STREET ADDRESS	777 S. FLAGLER DRIVE SUITE 500 E	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NEISEN KASDIN	
STREET ADDRESS	2 SOUTH BISCAYNE BLVD, # 3400	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ERNEST A. COX III** 2/27/03 561-650-0593

CR2E037 (10/02)