2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003
Secretary of State

DOCUMENT# N98000000578

Entity Name: OPERATION SAVE CHILDREN OSC OPERATION SANTA CLAUS, INC.

Current Principal Place of Business:

4411 BEE RIDGE RD
#217
SARASOTA, FL 342332514 US

New Principal Place of Business:

Current Mailing Address:

4411 BEE RIDGE RD
#217
SARASOTA, FL 342332514 US

New Mailing Address:

FEI Number: 65-0813412 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VANNUCCI, RICHARD A
13466 HERITAGE WAY
SARASOTA, FL 34240 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:	PD	( ) Delete
Name:	VANNUCCI, RICHARD	
Address:	13466 HERITAGE WAY	
City-St-Zip:	SARASOTA, FL 34240	
Title:	BM	( ) Delete
Name:	OWEN, JIM	
Address:	5009 STURBRIDGE CT	
City-St-Zip:	SARASOTA, FL 34238	
Title:	BD	( ) Delete
Name:	ENGEBRECHT, SUSAN	
Address:	2501 MILLINGTON	
City-St-Zip:	PLANO, TX 75093	
Title:	BD	( ) Delete
Name:	ANGELOTTI, RICHARD	
Address:	240 S. PINEAPPLE AVE	
City-St-Zip:	SARASOTA, FL 34236	
Title:	S	( ) Delete
Name:	WEST, WENDY	
Address:	4411 BEE RIDGE RD. #217	
City-St-Zip:	SARASOTA, FL 34233	
Title:	T	( ) Delete
Name:	SWAIN, DARREN	
Address:	1637 IDLE LN	
City-St-Zip:	SARASOTA, FL 34231	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	VROOM, SHERRI	
Address:	6021 MEDICI CT.	
City-St-Zip:	SARASOTA, FL 34243	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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: RICHARD VANNUCCI PD 04/28/2003

Electronic Signature of Signing Officer or Director — Date