

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000003785

FILED  
Apr 09, 2002 8:00 AM  
Secretary of State

Entity Name: STRATEGIC POLICIES INSTITUTE, INC.

## Current Principal Place of Business:

21 AMERICAN BLVD  
ROSSVILLE, GA 30741

## New Principal Place of Business:

## Current Mailing Address:

21 AMERICAN BLVD  
ROSSVILLE, GA 30741

## New Mailing Address:

FEI Number: 65-0846005

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WILLIAMS, RICK  
1533 SEABREEZE STREET  
CLEARWATER, FL 33756

## 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: MURPHY, CHARLES DR.  
Address: 21 AMERICAN BLVD.  
City-St-Zip: ROSSVILLE, GA 30741

Title: D ( ) Delete  
Name: LAROSE, JAMES P  
Address: 2404 LAKESIDE DRIVE  
City-St-Zip: FREDERICK, MD 21702

Title: D ( ) Delete  
Name: TURNIPSEED, GEORGE  
Address: 7242 ROLLING HILLS BLVD  
City-St-Zip: MONTGOMERY, AL 36116

Title: D ( ) Delete  
Name: TURNIPSEED, LAINEY  
Address: 7242 ROLLING HILLS BLVD  
City-St-Zip: MONTGOMERY, AL 36116

Title: D ( ) Delete  
Name: MURPHY, RONALD  
Address: 21 AMERICAN BLVD.  
City-St-Zip: ROSSVILLE, GA 30741

Title: D ( ) Delete  
Name: FRANCIS, GAIL  
Address: 1809 E 14TH ST  
City-St-Zip: CHATTANOOGA, TN 37404

## 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: ( ) 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: CHARLES A. MURPHY

PD

04/09/2002

Electronic Signature of Signing Officer or Director

Date