

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000005821

FILED
Mar 18, 2003
Secretary of State

Entity Name: LINUX ENTHUSIASTS AND PROFESSIONALS, INC.

Current Principal Place of Business:

P.O. BOX 944
PLYMOUTH, FL 32768

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 944
PLYMOUTH, FL 32768

New Mailing Address:

FEI Number: 59-3607820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LITT, STEVE
385 FOREST PARK CIRCLE
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

MORRISON, AARON
435 ELKWOOD LANE
ORLANDO, FL 32825 US

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: AARON MORRISON

03/18/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: JONES, DILLON
Address: 1225 SHELTER ROCK ROAD
City-St-Zip: ORLANDO, FL 32835

Title: V () Delete
Name: BILLSBROUGH, DAVID
Address: 907-1 BALLARD ST
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D () Delete
Name: ASHE, BRIAN
Address: 3007 WOODRUFF DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: LANG, MAX F
Address: 117 RIVER CHASE DR
City-St-Zip: ORLANDO, FL 32807

Title: S () Delete
Name: ALEXANDER, MARK
Address: 8208 STEEPLECHASE BLVD
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: ASHE, BRIAN
Address: 3007 WOODRUFF DRIVE
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JONES, ZELIC
Address: 1225 SHELTER ROCK ROAD
City-St-Zip: ORLANDO, FL 32835

Title: P (X) Change () Addition
Name: BARNETT, PHIL
Address: 1105 BINION RD
City-St-Zip: APOPKA, FL 32768

Title: S (X) Change () Addition
Name: ASHE, BRIAN
Address: 3007 WOODRUFF DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: V (X) Change () Addition
Name: LANG, MAX F
Address: 117 RIVER CHASE DR
City-St-Zip: ORLANDO, FL 32807

Title: T (X) Change () Addition
Name: MORRISON, AARON
Address: 435 ELKWOOD LANE
City-St-Zip: ORLANDO, FL 32825

Title: D (X) Change () Addition
Name: PRINGLE, HALE
Address: 406 ALCAZAR AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: AARON MORRISON

T

03/18/2003

Electronic Signature of Signing Officer or Director

Date