

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000007370

FILED
Mar 07, 2003
Secretary of State

Entity Name: HUMANITECH, INC.

Current Principal Place of Business:

15 SENTRY OAK PLACE
PALM COAST, FL 32137

New Principal Place of Business:

P.O. BOX 19098
JACKSONVILLE, FL 32245

Current Mailing Address:

P. O. BOX 354469
PALM COAST, FL 321354469

New Mailing Address:

P. O. BOX 19098
JACKSONVILLE, FL 32245

FEI Number: 59-3606944

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALMFORTH, SHARON D
15 SENTRY OAK PLACE
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

BALMFORTH, SHARON D
8725 HAMPSHIRE GLEN DR. S.
JACKSONVILLE, FL 32256 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:

03/07/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BALDWIN, VALERI L
Address: 1337 PADDOCK PALCE
City-St-Zip: BARTLETT, IL 60103

Title: PTD () Delete
Name: BALMFORTH, JOHN
Address: PO BOX 354469
City-St-Zip: PALM COAST, FL 321354469

Title: VPSD () Delete
Name: BALMFORTH, SHARON
Address: PO BOX 354469
City-St-Zip: PALM COAST, FL 321354469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PTD (X) Change () Addition
Name: BALMFORTH, JOHN
Address: PO BOX 19098
City-St-Zip: JACKSONVILLE, FL 32245

Title: VPSD (X) Change () Addition
Name: BALMFORTH, SHARON
Address: PO BOX 19098
City-St-Zip: JACKSONVILLE, FL 32245

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: SHARON D. BALMFORTH

VP

03/07/2003

Electronic Signature of Signing Officer or Director

Date