

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000015257

FILED
Mar 08, 2003
Secretary of State

Entity Name: HALLSEY ENTERPRISES COMPANY

Current Principal Place of Business:

PO BOX 380007
MURDOCK, FL 339380007

New Principal Place of Business:

Current Mailing Address:

PO BOX 380007
MURDOCK, FL 339380007

New Mailing Address:

FEI Number: 65-0987134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, FRED
1193 GUILD STREET
PORT CHARLOTTE, FL 33952 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: HALL, JOHN R
Address: 1193 GUILD STREET
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HALL, JOHN R
Address: 1193 GUILD STREET
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: DST () Change (X) Addition
Name: HALL, FRED
Address: 1193 GUILD STREET
City-St-Zip: PORT CHARLOTT, FL 33952

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRED HALL

DST

03/08/2003

Electronic Signature of Signing Officer or Director

Date