2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000050877

Entity Name: TERCILLA, COURTEMANCHE ARCHITECTS, INC.

FILED May 17, 2003 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 3233 COMMERCE PLACE SUITE B WEST PALM BEACH, FL 33407 **New Mailing Address: Current Mailing Address:** 3233 COMMERCE PLACE SUITE B WEST PALM BEACH, FL 33407 FEI Number: 65-1022634 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TERCILLA, RENE 3233 COMMERCE PLACE SUITE B WEST PALM BEACH, FL 33407 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition TERCILLA, RENE PRESIDE Name: Name: 6507 SPRING MEADOW DRIVE Address: Address: City-St-Zip: GREENACRES, FL 33413 City-St-Zip: Title: Title: () Change () Addition () Delete Name: COURTEMANCHE, LANCE VICE PR Name: 12448 154TH ROAD NORTH Address: Address: JUPITER, FL 33411 City-St-Zip: City-St-Zip: Title: Title: () Delete MRS (X) Change () Addition WATSON, SCOTT SEC/TRE TERCILLA, GINA SEC/TRE Name: Name: 250 FAIRWAY WEST 6507 SPRING MEADOW DRIVE Address: Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: WEST PALM BEACH, FL 33413 Title: MRS. (X) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GINA TERCILLA SEC 05/17/2003

WATSON, RICKELLE 2ND VIC

250 FAIRWAY WEST

TEQUESTA, FL 33469

Name: Address:

City-St-Zip: