## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000072232

Entity Name: A.O.D., INC.

FILED Mar 31, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9039 STAR PASS DRIVE 9140 GOLFSIDE DRIVE JACKSONVILLE, FL 32256 SUITE 5N

JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

P O BOX 54156 JACKSONVILLE, FL 322454156

FEI Number: 58-2562090 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHEAR, ROBERT L 2790 SUNSET POINT ROAD CLEARWATER, FL 33759 SHEAR, ROBERT L 2 PRESTIGE PLACE, 2650 MCCORMICK DRIVE SUITE # 130 CLEARWATER, FL 33759

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: 03/31/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

P () Delete Title: P (X) Change () Addition

 Name:
 SWANSON, DAVID
 Name:
 SWANSON, DAVID J

 Address:
 9039 STARPASS DRIVE
 Address:
 9140 GOLFSIDE DRIVE, SUITE 5N

 City-St-Zip:
 JACKSONVILLE, FL 32256
 City-St-Zip:
 JACKSONVILLE, FL 32256

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: DAVID J SWANSON P 03/31/2003