2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003
Secretary of State

DOCUMENT# P00000101359

Entity Name: LLOYD DANIEL PUBLISHING, INC.

Current Principal Place of Business:

1600 S. FEDERAL HWY., STE. 420
POMPANO BEACH, FL 33062

New Principal Place of Business:

1600 S. FEDERAL HWY., STE. 811
POMPANO BEACH, FL 33062

Current Mailing Address:

1600 S. FEDERAL HWY., STE. 420
POMPANO BEACH, FL 33062

New Mailing Address:

1600 S. FEDERAL HWY., STE. 811
POMPANO BEACH, FL 33062

FEI Number: 65-1052149 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCALF, LLOYD D
1600 S. FEDERAL HWY., STE. 420
POMPANO BEACH, FL 33062

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: PD ( ) Delete
Name: SCALF, LLOYD D
Address: 1170 N. FEDERAL HWY, #1012
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: TD ( ) Delete
Name: SCALF, LINDA L
Address: 1170 N. FEDERAL HWY, #1012
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VSD ( ) Delete
Name: SCALF, CHAD D
Address: 3434 SAHARA SPRINGS BLVD.
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: CHAD SCALF VSD 09/08/2003

Electronic Signature of Signing Officer or Director — Date