2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000105117

Entity Name: COWFORD COMPANY, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3414 N MAIN ST 13140 TAMARISK CT JACKSONVILLE, FL 32206 US JACKSONVILLE, FL 32246 US **Current Mailing Address: New Mailing Address:** 13140 TAMARISK CT JACKSONVILLE, FL 32246 US FEI Number: 52-2279824 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: HANCOCK, ANNE HANCOCK, ANNE 6628 EVERGREEN AVE 3616 MARSH CREEK DR N JACKSONVILLE, FL 32208 US JACKSONVILLE, FL 32277 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: ANNE HANCOCK 04/30/2003 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 HANCOCK, MICHAEL Name: Name: 13140 TAMARISK CT Address: Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: Title: () Delete Title: () Change () Addition HANCOCK, JONI Name: Name: 13140 TAMARISK CT Address: Address: JACKSONVILLE, FL 32246 City-St-Zip: 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: MICHAEL HANCOCK PT 04/30/2003