

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000105875

FILED  
Jan 07, 2003  
Secretary of State

Entity Name: JIBE, INC.

## Current Principal Place of Business:

2 HARBOUR PLACE  
302 KNIGHTS RUN AVENUE, SUITE 1250  
TAMPA, FL 33602

## New Principal Place of Business:

2 HARBOUR PLACE  
302 KNIGHTS RUN AVENUE, SUITE 1250  
TAMPA, FL 33602 US

## Current Mailing Address:

2 HARBOUR PLACE  
302 KNIGHTS RUN AVENUE, SUITE 1250  
TAMPA, FL 33602

## New Mailing Address:

2 HARBOUR PLACE  
302 KNIGHTS RUN AVENUE, SUITE 1250  
TAMPA, FL 33602 US

FEI Number: 59-3690256

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ATER, HERBERT NEAL  
302 KNIGHTS RUN ROAD  
SUITE 1250  
TAMPA, FL 33602 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: PD ( ) Delete  
Name: SCHMITZER, GREGORY S  
Address: 302 KNIGHTS RUN ROAD SUITE 1250  
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete  
Name: ATER, HERBERT N  
Address: 302 KNIGHTS RUN ROAD SUITE 1250  
City-St-Zip: TAMPA, FL 33602

Title: VP ( ) Delete  
Name: MARLEWSKI, KENNETH  
Address: 302 KNIGHTS RUN ROAD SUITE 1250  
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete  
Name: MILLER, W. SCOTT  
Address: 100 N TAMPA STREET SUITE 2675  
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete  
Name: RODRIGUEZ, JARED  
Address: 5515 ANDERSON ROAD SUITE B  
City-St-Zip: TAMPA, FL 33614

### 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:

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: HERBERT NEAL ATER

D

01/07/2003

Electronic Signature of Signing Officer or Director

Date