2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003
Secretary of State

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Entity Name: INVESTIGATIVE SERVICES OF JACKSONVILLE INC.

Current Principal Place of Business:

9951 ATLANTIC BLVD., SUITE 431
JACKSONVILLE, FL 32225

New Principal Place of Business:

8787 SOUTHSIDE BLVD
SUITE 5810
JACKSONVILLE, FL 32256 US

Current Mailing Address:

9951 ATLANTIC BLVD., SUITE 431
JACKSONVILLE, FL 32225

New Mailing Address:

P O BOX 351496
JACKSONVILLE, FL 322351496 US

FEI Number: 59-3694697 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHEPPARD, LAWRENCE R
9951 ATLANTIC BLVD.
SUITE 431
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

SHEPPARD, LAWRENCE R
8787 SOUTHSIDE BLVD
SUITE 5810
JACKSONVILLE, FL 32256 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: _____ 04/30/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SHEPPARD, LAWRENCE R
Address: 9951 ATLANTIC BLVD. SUITE 431
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete
Name: BATEH, SAM K
Address: 9951 ATLANTIC BLVD SUITE 431
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete
Name: ORSO, GERALD P
Address: 9951 ATLANTIC BLVD. SUITE 431
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SHEPPARD, LAWRENCE R
Address: P O BOX 351496
City-St-Zip: JACKSONVILLE, FL 322351496 US

Title: D (X) Change ( ) Addition
Name: BATEH, SAM K
Address: P O BOX 351496
City-St-Zip: JACKSONVILLE, FL 322351496 US

Title: D (X) Change ( ) Addition
Name: ORSO, GERALD P
Address: P O BOX 351496
City-St-Zip: JACKSONVILLE, FL 322351496 US

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: GERALD P ORSO D 04/30/2003
Electronic Signature of Signing Officer or Director — Date