2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003
Secretary of State

DOCUMENT# P01000000534

Entity Name: SCHOOL SAFETY INSTITUTE, INC.

Current Principal Place of Business:

7304 BELVEDERE TERR
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

4740 WOLFRAM LANE
NEW PORT RICHEY, FL 34653

Current Mailing Address:

7304 BELVEDERE TERR
NEW PORT RICHEY, FL 34655

New Mailing Address:

4740 WOLFRAM LANE
NEW PORT RICHEY, FL 34653

FEI Number: 59-3691142 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRESCOTT, BRIAN
7304 BELVEDERE TERR
NEW PORT RICHEY, FL 34655

Name and Address of New Registered Agent:

PRESCOTT, BRIAN
4740 WOLFRAM LANE
NEW PORT RICHEY, FL 34653

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: BRIAN PRESCOTT 04/30/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PRESCOTT, BRIAN
Address: 7304 BELVEDERE TERR
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PRESCOTT, BRIAN
Address: 4740 WOLFRAM LANE
City-St-Zip: NEW PORT RICHEY, FL 34653

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: BRIAN PRESCOTT D 04/30/2003
Electronic Signature of Signing Officer or Director — Date