

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000003536

FILED
Apr 23, 2002 8:00 AM
Secretary of State

Entity Name: THREE P'S AND A B, INC.

Current Principal Place of Business:

8074 36 AVE NORTH
ST PETERSBURG, FL 33710

New Principal Place of Business:

164 JOHN'S PASS BOARDWALK
MADEIRA BEACH, FL 33708

Current Mailing Address:

8074 36 AVE NORTH
ST PETERSBURG, FL 33710

New Mailing Address:

164 JOHN'S PASS BOARDWALK
MADEIRA BEACH, FL 33708

FEI Number: 59-3691802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEADMAN, RAYMOND P
8074 36 AVE NORTH
ST PETERSBURG, FL 33710

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STEADMAN, RAYMOND P
Address: 8074 36 AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33710

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D () Change (X) Addition
Name: MALGADEY, PETER G
Address: PO BOX 8400
City-St-Zip: MADEIRA BEACH, FL 33708

Title: D () Change (X) Addition
Name: STEADMAN, PAMELA S
Address: 8074 36TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: D () Change (X) Addition
Name: MALGADEY, BETHEL
Address: PO BOX 8400
City-St-Zip: MADEIRA BEACH, FL 33708

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: PETER G MALGADEY

D

04/23/2002

Electronic Signature of Signing Officer or Director

_____ Date