

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000015514

FILED
Mar 11, 2003
Secretary of State

Entity Name: ESEARCHPRO, INC.

Current Principal Place of Business:

2454 N MCMULLEN BOOTH RD
B429
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1278
PAUMA VALLEY, CA 92061

New Mailing Address:

FEI Number: 59-3697062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHEELER, BOBBIE
2454 N MCMULLEN BOOTH RD #B429
CLEARWATER, FL 33759 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: P () Delete
Name: SCHUELER, KRISTIN
Address: PO BOX 1278
City-St-Zip: PAUMA VALLEY, CA 92061

Title: C () Delete
Name: JILES, EVERETT
Address: PO BOX 1278
City-St-Zip: PAUMA VALLEY, CA 92061

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JILES, KRISTIN S
Address: PO BOX 1278
City-St-Zip: PAUMA VALLEY, CA 92061

Title: C (X) Change () Addition
Name: JILES, EVERETT C
Address: PO BOX 1278
City-St-Zip: PAUMA VALLEY, CA 92061

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: KRISTIN S. JILES

P

03/11/2003

Electronic Signature of Signing Officer or Director

Date