

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000051864

Entity Name: SIMPLYEFFECTIVE, INC.

FILED
Apr 24, 2002 8:00 AM
Secretary of State

Current Principal Place of Business:

PO BOX 385
CLEARWATER, FL 33757

New Principal Place of Business:

PO BOX 76472
SAINT PETERSBURG, FL 33734

Current Mailing Address:

PO BOX 385
CLEARWATER, FL 33757

New Mailing Address:

PO BOX 76472
SAINT PETERSBURG, FL 33734

FEI Number: 59-3721377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNOR, PATRICK M
O'CONNOR & ASSOCIATES
2240 BELLEAIR RD., STE. 160
CLEARWATER, FL 33764 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

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: WINTRIP, SCOTT M
Address: PO BOX 385
City-St-Zip: CLEARWATER, FL 33757

Title: D () Delete
Name: PERRY, JAY R
Address: PO BOX 385
City-St-Zip: CLEARWATER, FL 33757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: WINTRIP, SCOTT M
Address: 1350 26TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: VSD (X) Change () Addition
Name: PERRY, JAY R
Address: 101 ROBINSON WOODS
City-St-Zip: CHARLOTTESVILLE, VA 22903

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: SCOTT M. WINTRIP

P

04/24/2002

Electronic Signature of Signing Officer or Director

Date