

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000093670

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

Entity Name: TOWNCENTER MEDIA, INC.

## Current Principal Place of Business:

203 VILLA DI ESTE TERRACE #105  
LAKE MARY, FL 32746

## New Principal Place of Business:

6668 SYLVAN WOODS DRIVE  
SANFORD, FL 32771

## Current Mailing Address:

203 VILLA DI ESTE TERRACE #105  
LAKE MARY, FL 32746

## New Mailing Address:

6668 SYLVAN WOODS DRIVE  
SANFORD, FL 32771

FEI Number: 59-3750350

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORTENSEN, JEFFREY Q  
203 VILLA DI ESTE TERRACE #105  
LAKE MARY, FL 32746

## Name and Address of New Registered Agent:

MORTENSEN, JEFFREY Q  
6668 SYLVAN WOODS DRIVE  
SANFORD, FL 32771

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: JEFFREY Q MORTENSEN

04/23/2002

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: DP ( ) Delete  
Name: MORTENSEN, JEFFREY Q  
Address: 203 VILLA DI ESTE TERRACE #105  
City-St-Zip: LAKE MARY, FL 32746

Title: DVS ( ) Delete  
Name: MORTENSEN, KIMBERLY R  
Address: 203 VILLA DI ESTE TERRACE #105  
City-St-Zip: LAKE MARY, FL 32746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: MORTENSEN, JEFFREY Q  
Address: 6668 SYLVAN WOODS DRIVE  
City-St-Zip: SANFORD, FL 32771

Title: DVS (X) Change ( ) Addition  
Name: MORTENSEN, KIMBERLY R  
Address: 6668 SYLVAN WOODS DRIVE  
City-St-Zip: SANFORD, FL 32771

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: JEFFREY Q MORTENSEN

DP

04/23/2002

Electronic Signature of Signing Officer or Director

Date