

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 23, 2003 8:00 am**  
**Secretary of State**

04-23-2003 90303 015 \*\*\*150.00

<b>DOCUMENT # P01000095455</b> 1. Entity Name <b>WODRASKA PARTNERS, INC.</b>					
Principal Place of Business <b>501 SOUTH FLAGLER DRIVE SUITE 505 WEST PALM BEACH, FL 33401</b>			Mailing Address <b>501 SOUTH FLAGLER DRIVE SUITE 505 WEST PALM BEACH, FL 33401</b>		
2. Principal Place of Business <b>114 E. Coralfish Ln.</b>		3. Mailing Address <b>114 E. Coralfish Ln.</b>			
City & State <b>Jupiter Fla.</b>		City & State <b>Jupiter, Fla.</b>		4. FEI Number <b>65-1153381</b>	
Zip <b>33477</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>FRIEDLAND, KIRK 501 SOUTH FLAGLER DRIVE SUITE 505 WEST PALM BEACH, FL 33401</b>				7. Name and Address of New Registered Agent Name <b>John R. Wodraska</b> Street Address (P.O. Box Number is Not Acceptable) <b>114 E. Coralfish Ln.</b> City <b>Jupiter</b> FL <b>33477</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <b>John R. Wodraska (John R. Wodraska Pres.)</b> DATE <b>4/20/03</b> <small>(NOTE: Registered Agent signature required when installing)</small>					
FILE NOW! FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WODRASKA, JOHN R 101 WESTCOTT STREET #803 HOUSTON, TX 77007	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	114 E. Coralfish Ln. Jupiter, Fla. 33477	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WODRASKA, TODD R 101 WESTCOTT STREET #803 HOUSTON, TX 77007	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	114 E. Coralfish Ln. Jupiter, FLA 33477	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WODRASKA, CYNTHIA L 101 WESTCOTT STREET #803 HOUSTON, TX 77007	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	132 Timber Lane Jupiter FLA 33458	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	   	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	   	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	   	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	   	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <b>John R. Wodraska (President)</b> DATE <b>4/20/03</b> DAYTIME PHONE # <b>561 575-7856</b>					

CR2E034 (10/02)