

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000109993

FILED
Apr 10, 2002 8:00 AM
Secretary of State

Entity Name: BOSWORTH REPORTING, INC.

Current Principal Place of Business:

10212 A HAVISTA AVE, APT 103
TAMPA, FL 33647

New Principal Place of Business:

P.O. BOX 48673
TAMPA, FL 33647

Current Mailing Address:

PO BOX 48673
TAMPA, FL 33647

New Mailing Address:

FEI Number: 59-3758759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSWORTH, ROBYN
10212 A HAVISTA AVE, APT 103
TAMPA, FL 33647

Name and Address of New Registered Agent:

BOSWORTH, ROBYN
10212 ALTAVISTA AVE, APT 103
TAMPA, FL 33647

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: ROBYN BOSWORTH

04/10/2002

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS. () Change (X) Addition
Name: BOSWORTH, ROBYN M
Address: 10212 ALTAVISTA AVENUE, APT. 103
City-St-Zip: TAMPA, FL 33647 US

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: ROBYN BOSWORTH

PRES

04/10/2002

Electronic Signature of Signing Officer or Director

Date