2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003
Secretary of State

DOCUMENT# P01000120326

Entity Name: ACCESS FINANCIAL CENTER, INC.

Current Principal Place of Business:

2257 IRONSTONE DR WEST
JACKSONVILLE, FL 32246

New Principal Place of Business:

12679 QUARTERHORSE TRAIL
JACKSONVILLE, FL 32223

Current Mailing Address:

2257 IRONSTONE DR WEST
JACKSONVILLE, FL 32246

New Mailing Address:

12679 QUARTERHORSE TRAIL
JACKSONVILLE, FL 32223

FEI Number: 59-3708160 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLOHESSEY, EDWARD F
2257 IRONSTONE DR WEST
JACKSONVILLE, FL 32246

Name and Address of New Registered Agent:

CLOHESSEY, EDWARD F
12679 QUARTERHORSE TRAIL
JACKSONVILLE, FL 32223

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: _____ 04/30/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CLOHESSEY, EDWARD F
Address: 2257 IRONSTONE DR WEST
City-St-Zip: JACKSONVILLE, FL 32246

Title: V ( ) Delete
Name: CLOHESSEY, EDWARD F
Address: 2257 IRONSTONE DR WEST
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CLOHESSEY, EDWARD F
Address: 12679 QUARTERHORSE TRAIL
City-St-Zip: JACKSONVILLE, FL 32223

Title: V (X) Change ( ) Addition
Name: CLOHESSEY, EDWARD F
Address: 12679 QUARTERHORSE TRAIL
City-St-Zip: JACKSONVILLE, FL 32223

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: EDWARD F CLOHESSEY PRES 04/30/2003
Electronic Signature of Signing Officer or Director — Date