

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000002643

Entity Name: ANTHONY OLSON, P.A.

FILED
Apr 07, 2003
Secretary of State

Current Principal Place of Business:

5314 S. LOCKWOOD RIDGE ROAD
SARASOTA, FL 34231

New Principal Place of Business:

2121 MAIN STREET
SUITE C
SARASOTA, FL 34237

Current Mailing Address:

5314 S. LOCKWOOD RIDGE ROAD
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 94-3414592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSON, ANTHONY E
5314 S. LOCKWOOD RIDGE ROAD
SARASOTA, FL 34231

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OLSON, ANTHONY E
Address: 5314 S. LOCKWOOD RIDGE ROAD
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANTHONY OLSON

PD

04/07/2003

Electronic Signature of Signing Officer or Director

_____ Date