## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000007755

Entity Name: XODUS BUSINESS & TECHNOLOGY SOLUTIONS, INC.

Apr 25, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5703 RED BUG LAKE RD. 5703 RED BUG LAKE RD. WINTER SPRINGS, FL 32708

405

WINTER SPRINGS, FL 32708

**Current Mailing Address: New Mailing Address:** 

5703 RED BUG LAKE RD 5703 RED BUG LAKE RD.

WINTER SPRINGS, FL 32708

WINTER SPRINGS, FL 32708

FEI Number: 04-3586644 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOHNSON, DEREK F PHILLIP, MEADE T 1970 MICHÍGAN AVE., BLDG. D 3330 BIŚCAYNE DR.

COCOA, FL 32922 MERRITT ISLAND, FL 32953 US

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: PHILLIP T. MEADE 04/25/2003

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete DETTRO, ANDREW Name: 5703 RED BUG LAKE RD. Address: City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete Name: MEADE, SHELBY 5703 RED BUG LAKE RD. Address: WINTER SPRINGS, FL 32708

Title: () Delete

Name: Address City-St-Zip:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title:

DETTRO, ANDREW Name:

5703 RED BUG LAKE RD. #405 Address: City-St-Zip: WINTER SPRINGS, FL 32708

Title: (X) Change ( ) Addition DST

Name: MEADE, SHELBY S

5703 RED BUG LAKE RD. #405 Address: WINTER SPRINGS, FL 32708 City-St-Zip:

Title: ( ) Change (X) Addition

Name: MEADE, PHILLIP T

5703 RED BUG LAKE RD. #405 Address: City-St-Zip: WINTER SPRINGS, FL 32708

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.

Ρ SIGNATURE: PHILLIP T. MEADE 04/25/2003