

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000012630

FILED  
Apr 07, 2003  
Secretary of State

Entity Name: PC PRIDE INC.,

## Current Principal Place of Business:

P.O. BOX 533832  
ORLANDO, FL 32853

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 533832  
ORLANDO, FL 32853

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CRAWFORD, JAVON C  
157 AUTUMN BREEZE WAY  
WINTER PARK, FL 32792

## Name and Address of New Registered Agent:

CRAWFORD, CODY  
P.O. BOX 533832  
ORLANDO, FL 32853

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: CODY CRAWFORD

04/07/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D (X) Delete  
Name: SCHOFIELD, MIKEAL  
Address: 375 LAKEPOINTE DR #103  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: V ( ) Delete  
Name: CRAWFORD, CODY  
Address: 157 AUTUMN BREEZE WAY  
City-St-Zip: WINTER PARK, FL 32792

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: CRAWFORD, CODY  
Address: P.O. BOX 533832  
City-St-Zip: ORLANDO, FL 32853

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: CODY CRAWFORD

P

04/07/2003

Electronic Signature of Signing Officer or Director

Date