

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000050955

1. Entity Name

PROFILE APPROACH DESIGNS, INC.



APPROVED
AND
FILED

03 MAY -1 AM 6:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
7412 15TH AVENUE, N.W.
BRADENTON FL 34210

Mailing Address
~~7412 15TH AVENUE, N.W.~~
~~BRADENTON FL 34210~~



2. Principal Place of Business

3. Mailing Address

P O BOX 14624

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State
BRADENTON FL

4. FEI Number

02-0591916

Applied For

Not Applicable

Zip

Country

Zip

34280-4624

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLOCKS, CHERI M
7412 15TH AVENUE, N.W.
BRADENTON FL 34210

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEOP
RIGGS, DWAYNE L.
POST-OFFICE BOX 14693
BRADENTON FL 34280 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
RIGGS, DWANE L.
POST OFFICE BOX 14624
BRADENTON FL 34280-4624 ☒ Change ☐ Addition
(SPELLING)

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
WILLOCKS, CHERI M
POST-OFFICE BOX 14693
BRADENTON FL 34280 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
POST OFFICE BOX 14624
BRADENTON FL 34280-4624 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
300018024228
05/05/03--01115--008 **450.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cheri M Willocks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-2003 94-795-8259
Date Daytime Phone #

0549331 AV

CP2E034 (10/02)