

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000065397

FILED
Jun 24, 2003
Secretary of State

Entity Name: SCARR & HARTSELLE, INC.

Current Principal Place of Business:

13030 PARK BLVD
SEMINOLE, FL 33776

New Principal Place of Business:

7555 SW HIGHWAY 200
SUITE 200
OCALA, FL 34476

Current Mailing Address:

13030 PARK BLVD
SEMINOLE, FL 33776

New Mailing Address:

13047 PARK BLVD
SEMINOLE, FL 33776

FEI Number: 48-1262072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIESET, JAMES R
6740-D CROSSWINDS DR N
ST PETERSBURG, FL 33710 US

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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: HARTSELLE, ART PRES
Address: 8229 113TH STREET
City-St-Zip: SEMINLE, FL 33776 US

Title: VPRES () Change (X) Addition
Name: SCARR, BARRY J VP
Address: 13030 PARK BLVD.
City-St-Zip: SEMINOLE, FL 33776 US

Title: DIR () Change (X) Addition
Name: SCARR, TONI S DIR
Address: 13047 PARK BLVD.
City-St-Zip: SEMINOLE, FL 33776 US

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: TONI S. SCARR

DIR

06/24/2003

Electronic Signature of Signing Officer or Director

Date