2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000067063

Entity Name: SOLUTIONS AFFILIATES, INC.

FILED May 01, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12050 PARK BLVD, N BLDG 35 #135 SEMINOLE, FL 33772 **New Mailing Address: Current Mailing Address: SOLUTIONS AFFILIATES** POST OFFICE BOX 7443 SEMINOLE, FL 33775 **FEI Number:** FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PLANT, BEVERLY A FITZGERALD, DAVID J 12050 PARK BLVD., N. P. O. BOX 7443 BLDG #35 APT 135 SEMINOLE, FL 33775 US SEMINOLE, FL 33775 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: S/DAVID J. FITZGERALD 05/01/2003 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PLANT, BEVERLY A Name: Name: 12050 PARK BOULEVARD, N. BLDG #35, #135 Address: Address: City-St-Zip: SEMINOLE, FL 33772 City-St-Zip: Title: Title: () Delete () Change () Addition FITZGERALD, DAVID J Name: Name: P. O. BOX 7443 Address: Address: SEMINOLE, FL 33775 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition PLANT, JOHN T III PLANT, JOHN T III Name: Name: 535 CORAL KEY PL #2B P. O. BOX 7443 Address: Address: City-St-Zip: NEWPORT NEWS, VA 23606 City-St-Zip: SEMINOLE, FL 33775 US Title: () Delete Title: (X) Change () Addition FITZGERALD, JANET M RN FITZGERALD, JANET M RN Name: Name: Address: 6009 N. GLENWOOD Address: 6009 N. GLENWOOD City-St-Zip: CHICAGO, IL 60660 City-St-Zip: CHICAGO, IL 60660 US Title: () Delete Title: (X) Change () Addition HOTT, CHERYL HOTT, CHERYL Name: Name: 10415 65TH AVE. N Address: 10415 65TH AVE. N Address: City-St-Zip: SEMINOLE, FL 33772 City-St-Zip: SEMINOLE, FL 33772 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: S/DAVID J. FITZGERALD D 05/01/2003