

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000073380

Entity Name: HYCOO, INC.

FILED
Apr 23, 2003
Secretary of State

Current Principal Place of Business:

6519 W. NEWBERRY RD.
1005
GAINESVILLE, FL 32605

Current Mailing Address:

6519 W. NEWBERRY RD.
APT. 1005
GAINESVILLE, FL 326054357

New Principal Place of Business:

6401 WESTGATE DR.
APT. 405
ORLANDO, FL 32835

New Mailing Address:

6401 WESTGATE DR.
APT. 405
ORLANDO, FL 32835

FEI Number: 41-2048845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CALDWELL, CLINTON M
6519 W. NEWBERRY RD.
APT. 1005
GAINESVILLE, FL 326054357

Name and Address of New Registered Agent:

CALDWELL, CLINTON M
6401 WESTGATE DR.
APT. 405
ORLANDO, FL 32835

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: CLINTON M CALDWELL

04/23/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: CALDWELL, CLINTON M
Address: 6519 W. NEWBERRY RD. APT. 1005
City-St-Zip: GAINESVILLE, FL 32605

Title: VS () Delete
Name: BILLINGER, TRACY L
Address: 6519 W. NEWBERRY RD. APT. 1005
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: CALDWELL, CLINTON M
Address: 6401 WESTGATE DR.
City-St-Zip: ORLANDO, FL 32835

Title: VS (X) Change () Addition
Name: BILLINGER, TRACY L
Address: 6401 WESTGATE DR.
City-St-Zip: ORLANDO, FL 32835

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: CLINTON M CALDWELL

PT

04/23/2003

Electronic Signature of Signing Officer or Director

Date