

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000073970

FILED
Apr 30, 2003
Secretary of State

Entity Name: INTREPID MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

4741 ATLANTIC BOULEVARD
SUITE D
JACKSONVILLE, FL 32207

New Principal Place of Business:

225 WATER STREET
SUITE 2020
JACKSONVILLE, FL 32202 US

Current Mailing Address:

4741 ATLANTIC BOULEVARD
SUITE D
JACKSONVILLE, FL 32207

New Mailing Address:

225 WATER STREET
SUITE 2020
JACKSONVILLE, FL 32202 US

FEI Number: 75-3083348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRIVER, G. RAY JR.
4741 ATLANTIC BOULEVARD
SUITE D
JACKSONVILLE, FL 32207

Name and Address of New Registered Agent:

INTREPID REGISTERED AGENT SERVICES, LLC
225 WATER STREET
SUITE 2020
JACKSONVILLE, FL 32202 US

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: G. RAY DRIVER, JR., PRESIDENT

04/30/2003

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:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Change (X) Addition
Name: MCAFEE, MATTHEW S
Address: 225 WATER STREET, SUITE 2020
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VD () Change (X) Addition
Name: BROCKWELL, PAUL H
Address: 4741 ATLANTIC BLVD., SUITE D
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: PD () Change (X) Addition
Name: DRIVER, GARY R
Address: 225 WATER STREET, SUITE 2020
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VTD () Change (X) Addition
Name: CAMERLENGO, JOSEPH V
Address: 4741 ATLANTIC BLVD., SUITE D
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: VSD () Change (X) Addition
Name: JOHNSON, TODD C
Address: 225 WATER STREET, SUITE 2020
City-St-Zip: JACKSONVILLE, FL 32202 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: G. RAY DRIVER, JR.

P

04/30/2003

Electronic Signature of Signing Officer or Director

Date