

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000082730

FILED
Apr 04, 2003
Secretary of State

Entity Name: PUSH DEVELOPMENT CORPORATION

Current Principal Place of Business:

POST OFFICE BOX 7392
PORT SAINT LUCIE, FL 34985

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 7392
PORT SAINT LUCIE, FL 34985

New Mailing Address:

FEI Number: 13-4215229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'LOUGHY, JAMES D ESQUIRE
8063 KIAWAH TRACE
PORT SAINT LUCIE, FL 34985

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:

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: MGR () Change (X) Addition
Name: D'LOUGHY, JAMES D ESQ
Address: 8063 KIAWAH TRACE
City-St-Zip: PORT ST. LUCIE, FL 34986 US

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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: JAMES D'LOUGHY

MGR

04/04/2003

Electronic Signature of Signing Officer or Director

Date