## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P02000105282

Entity Name: ONLINE NETWORKS, INC.

**FILED** Feb 24, 2003 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 550 N REO ST STE 300 TAMPA, FL 33609 **Current Mailing Address: New Mailing Address:** 550 N REO ST STE 300 TAMPA, FL 33609 FEI Number: 76-0716642 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CAPOTE, THOMAS 550 N RÉO ST STE 300 TAMPA, FL 33609 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CAPOTE, THOMAS Name: Name:

8610 HURON CT UNIT 61 Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

Name: PARSONS, NORMAN Name: PARSONS, NORMAN 377 REGAL PARK NE Address: 377 REGAL PARK NE Address: CALGARY, ALBERTA, CANADA, 72E0S6 CALGARY, AB T2E0S6 CN City-St-Zip: City-St-Zip:

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 Statutés. 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: THOMAS CAPOTE 02/24/2003 D