2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 10, 2003
Secretary of State

DOCUMENT# P02000115846

Entity Name: G & J MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

3125 KNOX MCRAE DRIVE
TITUSVILLE, FL 32780

New Principal Place of Business:

3838 S. HOPKINS AVENUE
TITUSVILLE, FL 32780

Current Mailing Address:

3125 KNOX MCRAE DRIVE
TITUSVILLE, FL 32780

New Mailing Address:

3838 S. HOPKINS AVENUE
TITUSVILLE, FL 32780

FEI Number: 05-0543462 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LOYD, GENE
3125 KNOX MCRAE DRIVE
TITUSVILLE, FL 32780

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: DP ( ) Delete
Name: LOYD, GENE
Address: 3125 KNOX MCRAE DRIVE
City-St-Zip: TITUSVILLE, FL 32780

Title: DV ( ) Delete
Name: LOYD, JOAN
Address: 3125 KNOX MCRAE DRIVE
City-St-Zip: TITUSVILLE, FL 32780

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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 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: GENE LOYD PRES 01/10/2003

Electronic Signature of Signing Officer or Director — Date