2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003
Secretary of State

DOCUMENT# P02000131463

Entity Name: CEDAR COVE INVESTMENTS, INC.

Current Principal Place of Business:

317 CEDAR COVE INVESTMENTS, INC.
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

317 CEDAR AVENUE
NEW SMYRNA BEACH, FL 32169 US

Current Mailing Address:

P.O. BOX 1231
NEW SMYRNA BEACH, FL 32170 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

SHAW, PETER M
18 BIRDIE DRIVE
NEW SMYRNA BEACH, FL, FL 32168 US

Name and Address of New Registered Agent:

SHAW, PETER M
317 CEDAR AVENUE
NEW SMYRNA BEACH, FL, FL 32169 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: PETER M. SHAW 04/21/2003
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SHAW, PETER M
Address: 18 BIRDIE DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: P ( ) Delete
Name: LAMBERT, LYNN P
Address: 317 CEDAR AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SHAW, PETER M
Address: 317 CEDAR AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

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: PETER M. SHAW P 04/21/2003
Electronic Signature of Signing Officer or Director Date