

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000132882

Entity Name: ENP CONSULTING, INC.

FILED  
Feb 28, 2003  
Secretary of State

## Current Principal Place of Business:

504 N. LIBERTY STREET  
JACKSONVILLE, FL 32202

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 40065  
JACKSONVILLE, FL 322030065

## New Mailing Address:

504 N. LIBERTY STREET  
JACKSONVILLE, FL 32202

FEI Number: 41-2072209

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PETERS, ELIZABETH N  
504 N. LIBERTY STREET  
JACKSONVILLE, FL 32202 US

## 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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS ( ) Change (X) Addition  
Name: PETERS, ELIZABETH N  
Address: 504 N. LIBERTY STREET  
City-St-Zip: JACKSONVILLE, FL 32202

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: ELIZABETH NOEL PETERS

MRS

02/28/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date