

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000006835

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: CHILDERS CONSULTING GROUP, INC.

Current Principal Place of Business:

7733 W. NEWBERRY ROAD
SUITE B-1
GAINESVILLE, FL 326066725 US

New Principal Place of Business:

PO BOX 90252
GAINESVILLE, FL 32607 US

Current Mailing Address:

7733 W. NEWBERRY ROAD
SUITE B-1
GAINESVILLE, FL 326066725 US

New Mailing Address:

PO BOX 90252
GAINESVILLE, FL 32607 US

FEI Number: 59-3160475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHILDERS, SELDON J
7733 W NEWBERRY ROAD
SUITE B-1
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

CHILDERS, SELDON J
PO BOX 90252
GAINESVILLE, FL 32607 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:

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHILDERS, SELDON J.
Address: PO BOX 90157
City-St-Zip: GAINESVILLE, FL 326070157

Title: VP () Delete
Name: FLACK, CINDY B
Address: 7733 W NEWBERRY ROAD SUITE B-1
City-St-Zip: GAINESVILLE, FL 32606

Title: T () Delete
Name: HUGHES, JOE D
Address: 7733 W NEWBERRY ROAD SUITE B-1
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHILDERS, SELDON J.
Address: PO BOX 90252
City-St-Zip: GAINESVILLE, FL 32607

Title: VP (X) Change () Addition
Name: FALCK, CINDY B
Address: PO BOX 90252
City-St-Zip: GAINESVILLE, FL 32607

Title: T (X) Change () Addition
Name: HUGHES, JOE D
Address: PO BOX 90252
City-St-Zip: GAINESVILLE, FL 32607

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: SELDON J. CHILDERS

P

04/30/2002

Electronic Signature of Signing Officer or Director

Date