2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000037552

Name:

Address: City-St-Zip: STEVENS, CAROL J

GAINESVILLE, FL 32608

7827 SW 42 DR

Entity Name: STEVENS LABORATORIES, INC.

FILED Jan 10, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
3749 SW 4 #3	2 AVE				
GAINESVI	LLE, FL 32608				
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
7827 SW 4 GAINESVII	13 DR LLE, FL 32608				
FEI Number:	59-3188163	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	Í3 DR LLE, FL 32608				
	named entity s of Florida.	ubmits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
	npaign Financing	Trust Fund Contribution ().	ADDITIONS/CHANGES	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () STEVENS, ROB 7827 SW 43 DR GAINESVILLE, I	l .	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	S () STEVENS, ROB 7827 SW 43 DR GAINESVILLE, F	1	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title:	ST ()	Delete	Title: () Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: CAROL J STEVENS ST 01/10/2003