

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000071503

FILED  
Apr 30, 2003  
Secretary of State

Entity Name: PRICELESS RESTORATIONS, INC.

## Current Principal Place of Business:

2417 NW 71ST PLACE  
GAINESVILLE, FL 32653 US

## New Principal Place of Business:

## Current Mailing Address:

2417 NW 71ST PLACE  
GAINESVILLE, FL 32653 US

## New Mailing Address:

FEI Number: 59-3197479

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRICE, DAVID C  
9305 NW 13TH PLACE  
GAINESVILLE, FL 32606

## 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: PMDT ( ) Delete  
Name: PRICE, DAVID C  
Address: 9305 NW 13 PLACE  
City-St-Zip: GAINESVILLE, FL 32606

Title: VP ( ) Delete  
Name: DELOACH, ROY  
Address: 444 NW 28TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32609

Title: D ( ) Delete  
Name: PRICE, DAVID C JR  
Address: 9305 NW 13TH PLACE  
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete  
Name: PRICE, STEPHEN E  
Address: 9305 E NW 13TH PL  
City-St-Zip: GAINESVILLE, FL 32606

Title: VPD ( ) Delete  
Name: PRICE, GWEN O  
Address: 9305 E NW 13TH PL  
City-St-Zip: GAINESVILLE, FL 32606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: DAVID C PRICE

PRES

04/30/2003

Electronic Signature of Signing Officer or Director

Date