2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003
Secretary of State

DOCUMENT# P93000081560

Entity Name: BILLY PENN, INC.

Current Principal Place of Business:

6940 STUART AVE
JACKSONVILLE, FL 32254 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 37982
JACKSONVILLE, FL 32236 US

New Mailing Address:

FEI Number: 59-3210356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, LEE B I
6940 STUART AVE
JACKSONVILLE, FL 32254 US

Name and Address of New Registered Agent:

KLARFELD, JOHN J
6940 STUART AVE
JACKSONVILLE, FL 32254 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: JOHN J. KLARFELD 04/16/2003
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VPDS ( ) Delete
Name: JONES, STEVEN C
Address: 6940 STUART AVE.
City-St-Zip: JACKSONVILLE, FL 32254

Title: PTD ( ) Delete
Name: JONES IV, LEE B
Address: 6940 STUART AVE.
City-St-Zip: JACKSONVILLE, FL 32254

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: JONES, STEVEN C
Address: 6940 STUART AVE.
City-St-Zip: JACKSONVILLE, FL 32254

Title: PD (X) Change ( ) Addition
Name: JONES IV, LEE B
Address: 6940 STUART AVE.
City-St-Zip: JACKSONVILLE, FL 32254

Title: STD ( ) Change (X) Addition
Name: KLARFELD, JOHN J
Address: 6940 STUART AVENUE
City-St-Zip: JACKSONVILLE, FL 32254

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: JOHN J KLARFELD T 04/16/2003
Electronic Signature of Signing Officer or Director Date