

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000003001

FILED
Apr 27, 2002 8:00 AM
Secretary of State

Entity Name: THE S. E. BAKER GROUP, INC.

Current Principal Place of Business:

112 WILD FERN DR.
LONGWOOD, FL 32779

New Principal Place of Business:

1918 WOODWARD STREET
ORLANDO, FL 32801

Current Mailing Address:

112 WILD FERN DR.
LONGWOOD, FL 32779

New Mailing Address:

1918 WOODWARD STREET.
ORLANDO, FL 32801

FEI Number: 59-3218647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERCEFIELD, DAVID S
230 LOOKOUT PLACE, SUITE 200
MAITLAND, FL 32751 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

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: PSTD () Delete
Name: BAKER, SUSAN
Address: 112 WILD FERN DRIVE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: BAKER, SUSAN E
Address: 112 WILD FERN DRIVE
City-St-Zip: LONGWOOD, FL 32779

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: SUSAN E. BAKER

PSTD

04/27/2002

Electronic Signature of Signing Officer or Director

Date