## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P94000015066

Entity Name: AET, INC.

FILED Apr 23, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1600 W. EAU GALLIE BLVD. SUITE 103 MELBOURNE, FL 32935 US							
Current Mailing Address:				New Mailing Address:			
P.O. BOX 33071 INDIALANTIC, FL 32903 US				1600 W. EAU GALLIE BLVD. SUITE 103 MELBOURNE, FL 32935 US			
FEI Number: 59-3226810 FEI Number Applied For ( ) FEI Number			FEI Numb	ber Not Appli	cable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and	Address of N	lew Registered Agent:	
SANDERS, THOMAS J JR 650 ISLAND CLUB CT #140 INDIATLANTIC, FL 32903 US				SANDERS, THOMAS J JR 58 SUNSET STREET SATELLITE BEACH, FL 32937 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: THOMAS J. SANDERS, JR.				04/23/2003			
	Electronic	: Signature of Registered Agent	• •			Date	
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR						TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () D SANDERS, THOM 331 SEABREEZE INDIALANTIC, FL		1	Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () D COMBS, CLYDE 499 CINNAMON E SATELLITE BEAC	DRIVE	1	Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () D DAVIS, JACOB A 370 FRANKLYN A INDIALANTIC, FL		1	Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () D MEANS, DALE P 2435 HOMESTEA MALABAR, FL 32		1	Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D (X) D QUINN, BOBBY G 3092 S. RIO BAY, INDIALANTIC, FL	A	1	Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST () D SANDERS, THOM 650 ISLAND CLUI INDIALANTIC, FL	B CT # 140	1	Title: Name: Address: City-St-Zip:	SANDERS, THO 58 SUNSET ST		

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: THOMAS J. SANDERS, JR. ST 04/23/2003