## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P95000038422

CAFFEE, MARK A

1258 W BUTTONBUSH DR

BEVERLY HILLS, FL 34465

Name:

Address:

City-St-Zip:

Entity Name: ACCU-TECH TECHNICAL SERVICES. INC

FILED Apr 10, 2003 Secretary of State

		LOTT TECHNICAL CERTIFICE	, 1140.		
Current Principal Place of Business:			New Princi	New Principal Place of Business:	
6833 W R CRYSTAL	ICH ST . RIVER, FL 3	4428			
Current Mailing Address:			New Mailing Address:		
P.O. BOX HOMOSA	3647 SSA SPRING	S, FL 34447			
FEI Number	: 59-3314437	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and	d Address of	Current Registered Agent:	Name and	Address of New Registered Agent:	
4341 S. CO HOMOSA	, STEVEN E ORBETT AVE SSA, FL 3444	46 US	nurnose of changing it	s registered office or registered agent, or both,	
	e of Florida.	Submits this statement for the	purpose or changing it	a registered office of registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered A	gent	Date	
Election Car	mpaign Financii	ng Trust Fund Contribution ( ).			
	S AND DIREC	-	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	KINGERY, ST	BETT AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CAFFEE, HAR 8621 W. CHA		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BERNARD, DO 3656 N. BROO	) Delete DNALD G DKSHIRE POINT (ER, FL 34428	Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition BERNARD, DONALD G 8012 W. PURVIS CRYSTAL RIVER, FL 34428	
Title:	P ()	X) 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: STEVEN E KINGERY T 04/10/2003