

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000077630

FILED
Apr 28, 2005
Secretary of State

Entity Name: UNISOURCE ADMINISTRATORS, INC.

Current Principal Place of Business:

5951 CATTLERIDGE BLVD., STE 200
SARASOTA, FL 34232 US

New Principal Place of Business:

6010 CATTLERIDGE DRIVE
SUITE 100
SARASOTA, FL 34232 US

Current Mailing Address:

5951 CATTLERIDGE BLVD., STE 200
SARASOTA, FL 34232 US

New Mailing Address:

6010 CATTLERIDGE DRIVE
SUITE 100
SARASOTA, FL 34232 US

FEI Number: 65-0619911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLWERT, ANDREW W III
5951 CATTLERIDGE BLVD., STE 200
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

OLWERT, ANDREW W III
6010 CATTLERIDGE DRIVE
SUITE 100
SARASOTA, FL 34232 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: ANDREW W. OLWERT III

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OLWERT, ANDREW W III
Address: 5951 CATTLERIDGE BLVD., STE 200
City-St-Zip: SARASOTA, FL 34232 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OLWERT, ANDREW W III
Address: 6010 CATTLERIDGE DRIVE
City-St-Zip: SARASOTA, FL 34232 US

Title: SC () Change (X) Addition
Name: MCCONNAUGHAY, JAMES N
Address: 1709 HERMITAGE BLVD.
City-St-Zip: TALLAHASSEE, FL 32308

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: ANDREW W. OLWERT

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date