2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003
Secretary of State

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Entity Name: COMMUNICATION MANPOWER, INC.

Current Principal Place of Business:

1555 SOUTH BLVD
CHIPLEY, FL 32428

New Principal Place of Business:

Current Mailing Address:

1012 MAIN ST.
CHIPLEY, FL 32428

New Mailing Address:

P O BOX 478
CHIPLEY, FL 32428

FEI Number: 59-3371172 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: TRAWICK, JAMES L JR
Address: 1340 PINEY GROVE ROAD
City-St-Zip: CHIPLEY, FL 32428

Title: P ( ) Delete
Name: TRAWICK, JAMES J
Address: 1693 HWY 277
City-St-Zip: CHIPLEY, FL 32428

Title: VPF ( ) Delete
Name: HINSON, LARRY
Address: 718 5TH STREET
City-St-Zip: CHIPLEY, FL 32428

Title: EVP ( ) Delete
Name: TRAWICK, CARLOS P
Address: 1839 SWEET BAY ROAD
City-St-Zip: CHIPLEY, FL 32428

Title: EVP ( ) Delete
Name: TRAWICK, DOUG
Address: 620 CANDY KITCHEN RD
City-St-Zip: CHIPLEY, FL 32428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TRAWICK, KENNETH W
Address: 1850 LASTER ROAD
City-St-Zip: CHIPLEY, FL 32428

Title: COO (X) Change ( ) Addition
Name: TRAWICK, DOUGLAS H
Address: 620 CANDY KITCHEN ROAD
City-St-Zip: CHIPLEY, FL 32428

Title: CFO (X) Change ( ) Addition
Name: HINSON, LARRY A
Address: P O BOX 45
City-St-Zip: CHIPLEY, FL 32428

Title: VP-O (X) Change ( ) Addition
Name: TRAWICK, TIMOTHY C
Address: 465 BAHOMA ROAD
City-St-Zip: CHIPLEY, FL 32428

Title: VP-O (X) Change ( ) Addition
Name: WELLS, CARLTON A
Address: 1387 WELLS ROAD
City-St-Zip: BONIFAY, FL 32425

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: KENNETH W TRAWICK P 04/21/2003

Electronic Signature of Signing Officer or Director — Date