2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000021671

Entity Name: CHRISTOPHER COVE TWO, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace Of Dusiliess.

4729 US HWY 17 4729 US HIGHWAY 17

STE 204 SUITE 204

ORANGE PARK, FL 32073 US ORANGE PARK, FL 32003 US

Current Mailing Address: New Mailing Address:

4729 US HWY 17 4729 US HIGHWAY 17

STE 204 SUITE 204

ORANGE PARK, FL 32073 US ORANGE PARK, FL 32003 US

FEI Number: 59-3367646 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOOD, JAMES R
4729 US HWY 17
4729 US HIGHWAY 17

STE 204 SUITE 204
ORANGE PARK, FL 32073 US ORANGE PARK, FL 32003 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: 04/30/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title: WOOD, JAMES R WOOD, JAMES R PRES. Name: Name: 4729 US HIGHWAY 17, SUITE 204 4729 US HWY 17 STE 204 Address: Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32003

 Title:
 V
 () Delete
 Title:
 V/S
 (X) Change () Addition

 Name:
 WOOD, SUSAN D
 Name:
 WOOD, SUSAN D V.P.

 Address:
 4729 US 17 SUITE 204
 Address:
 4729 US HIGHWAY 17, SUITE 204

 City-St-Zip:
 ORANGE PARK, FL 32003
 City-St-Zip:
 ORANGE PARK, FL 32003

 Title:
 () Delete
 Title:
 T () Change (X) Addition

 Name:
 Name:
 EDWARDS, JR., MABRY - C.F.O.

 Address:
 Address:
 4729 US HIGHWAY 17, SUITE 204

 City-St-Zip:
 ORANGE PARK, FL 32003

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: JAMES RICKY WOOD PRES 04/30/2003