

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000038909

FILED  
Mar 24, 2003  
Secretary of State

Entity Name: SPECIAL DELIVERY SERVICE, INC.

## Current Principal Place of Business:

3680 BOUGAINVILLA CT  
WINTER PARK, FL 32792

## New Principal Place of Business:

3680 BOUGAINVILLEA CT  
WINTER PARK, FL 32792

## Current Mailing Address:

3680 BOUGAINVILLA CT  
WINTER PARK, FL 32792

## New Mailing Address:

3680 BOUGAINVILLEA CT  
WINTER PARK, FL 32792

FEI Number: 59-3376817

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIMMONS, MARTHA  
3680 BOUGAINVILLA CT  
WINTER PARK, FL 32792 US

## Name and Address of New Registered Agent:

SIMMONS, MARTHA  
3680 BOUGAINVILLEA CT  
WINTER PARK, FL 32792 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: MARTHA SIMMONS

03/24/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: SIMMONS, MARTHA  
Address: 3680 BOUGAINVILLA CT  
City-St-Zip: WINTER PARK, FL 32792

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: SIMMONS, MARTHA  
Address: 3680 BOUGAINVILLEA CT  
City-St-Zip: WINTER PARK, FL 32792

Title: OWN ( ) Change (X) Addition  
Name: SIMMONS, MARTHA A OWNER  
Address: 3680 BOUGAINVILLEA CT  
City-St-Zip: WINTER PARK, FL 32792

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: MARTHA SIMMONS

OWN

03/24/2003

Electronic Signature of Signing Officer or Director

Date