

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000058921

FILED
Apr 27, 2002 8:00 AM
Secretary of State

Entity Name: MOODY CAPITAL MANAGEMENT, INC.

Current Principal Place of Business:

715 SUGAR BAY
STE 107
LAKE MARY, FL 32746 US

New Principal Place of Business:

715 SUGAR BAY WAY
STE 107
LAKE MARY, FL 32746 US

Current Mailing Address:

715 SUGAR BAY
STE 107
LAKE MARY, FL 32746 US

New Mailing Address:

FEI Number: 59-3430418 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOODY, JERRY R
715 SUGAR BAY WAY #107
LAKE MARY, FL 32746

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: MOODY, JERRY
Address: 715 SUGAR BAY WAY 107
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: MOODY, JERRY R PCEO
Address: 715 SUGAR BAY WAY STE 107
City-St-Zip: LAKE MARY, FL 32746

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: JERRY R MOODY

PCEO

04/27/2002

_____ Electronic Signature of Signing Officer or Director

_____ Date