2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000067312

FILED
Apr 29, 2003
Secretary of State

Entity Name: GO FLORIDA, INC.

Current Principal Place of Business:

PO BOX 451133
KISSIMMEE, FL 34745

New Principal Place of Business:

Current Mailing Address:

PO BOX 451133
KISSIMMEE, FL 34745

New Mailing Address:

FEI Number: 59-3407806 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FISHER, KARL J
PO BOX 451133
KISSIMMEE, FL 34745

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: PD ( ) Delete
Name: FISHER, JACK
Address: PO BOX 451133
City-St-Zip: KISSIMMEE, FL 34745

Title: VD ( ) Delete
Name: FISHER, SUE
Address: PO BOX 451133
City-St-Zip: KISSIMMEE, FL 34745

Title: S ( ) Delete
Name: FISHER, KARL J
Address: PO BOX 451133
City-St-Zip: KISSIMMEE, FL 34745

Title: T ( ) Delete
Name: FISHER, SUE
Address: PO BOX 451133
City-St-Zip: KISSIMMEE, FL 34745

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JACK FISHER PD 04/29/2003
Electronic Signature of Signing Officer or Director Date