2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2002 8:00 AM
Secretary of State

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Entity Name: DOCTOR DOCKSIDE, INC.

Current Principal Place of Business:

5204 S RIDGEWOOD AVE
DAYTONA BEACH, FL 32127

New Principal Place of Business:

5510-A S RIDGEWOOD AVE
PORT ORANGE, FL 32127

Current Mailing Address:

5204 S RIDGEWOOD AVE
DAYTONA BEACH, FL 32127

New Mailing Address:

5510-A S RIDGEWOOD AVE
PORT ORANGE, FL 32127

FEI Number: 59-3407838 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAGLE, ANNA L
210 GREEN LAKE CIR
LONGWOOD, FL 32779 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

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: P ( ) Delete
Name: HAGLE, ANNA L
Address: 210 GREEN LAKE CIR.
City-St-Zip: LONGWOOD, FL 32779 US

Title: VP ( ) Delete
Name: KENNEDY, BRAD
Address: 3700 S. ATLANTIC AVE. #204
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: KENNEDY, BRAD
Address: 143 VIA CAPRI
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

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: ANNA L HAGLE PRES 04/04/2002

Electronic Signature of Signing Officer or Director — Date