2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000073433

Entity Name: C.P.C., INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	IINOLE BLVD. E, FL 33772	US				
Current Mailing Address:			New Mailing Address:			
10857 CH LARGO, F	IRISTOPHER (FL 33774 U	CT IS				
FEI Number	r: 59-3400719	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and	d Address of	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:		
8640 SEN	A, PETER T IINOLE BLVD. .E, FL 33772					
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,		
in the Stat	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,		
in the Stat	e of Florida. RE:	submits this statement for the particles of Registered Ag		ed office or registered agent, or both, Date		
in the Stat SIGNATU	e of Florida. RE: Electro					
in the Stat SIGNATU Election Ca	e of Florida. RE: Electro	nic Signature of Registered Ag	ent			
in the Stat SIGNATU Election Ca OFFICER Title: Name: Address:	e of Florida. RE: Electro mpaign Financin	nic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete ARD, VEG 12DE	ent	Date		
in the Stat SIGNATU Election Ca	E of Florida. Electro Impaign Financir S AND DIRECT CD (EWERT RICH, VOBKUHLENV 22941 BARGT	nic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete ARD, VEG 12DE EHEIDE, GE) Delete AVID R	ent ADDITIONS/CHANG Title: Name: Address:	Date EES TO OFFICERS AND DIRECTORS:		

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: DAVID R. ROBINSON	PD	04/30/2003
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