2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000002922

Entity Name: LANCASTER ASSOCIATES, INC.

1548 LANCASTER TERRACE

JACKSONVILLE, FL 32204

Address: City-St-Zip: FILED Apr 12, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1548 LANCASTER TERR JACKSONVILLE, FL 32204 US **Current Mailing Address: New Mailing Address:** P O BOX 40749 JACKSONVILLE, FL 32203 US FEI Number: 59-3420050 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PURCELL, THOMAS K PURCELL, THOMAS K 1548 LANCASTER TERRACE 1548 LANCASTER TERRACE JACKSONVILLE, FL 32204 **SUITE 1235** JACKSONVILLE, FL 32204 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: 04/12/2002 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition PURCELL, THOMAS K Name: Name: 1548 LANCASTER TERRACE Address: Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: () Delete Title: Title: () Change () Addition Name: FLANAGAN, TIMOTHY L Name: 1548 LANCASTER TERRACE Address: Address: JACKSONVILLE, FL 32204 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition HAY, JONATHAN L Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JONATHAN L. HAY D 04/12/2002