2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2003
Secretary of State

DOCUMENT# P97000044094

Entity Name: WILLIAM H. SWAN & SONS, INC.

Current Principal Place of Business:

2336 N. LIBERTY STREET
JACKSONVILLE, FL 32206 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 3256
JACKSONVILLE, FL 32206 US

New Mailing Address:

FEI Number: 59-2629148 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NELSON, DAVID B
2336 N. LIBERTY STREET
JACKSONVILLE, FL 32206 US

Name and Address of New Registered Agent:

NELSON, JANIS
2336 N. LIBERTY STREET
JACKSONVILLE, FL 32206 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: JANIS NELSON 04/29/2003
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: NELSON, DAVID B
Address: 4118 ORTEGA FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: ST ( ) Delete
Name: PENCE, JOSEPH E
Address: 2598 HERSCHEL STREET
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: NELSON, LEIGH A
Address: 2641 ALGONQUIN AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: STD (X) Change ( ) Addition
Name: PENCE, JOSEPH E
Address: 2598 HERSCHEL STREET
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: D ( ) Change (X) Addition
Name: NELSON, JANIS
Address: 4118 ORTEGA FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: D ( ) Change (X) Addition
Name: JACKSON, LARRY R
Address: 2598 HERSCHEL STREET
City-St-Zip: JACKSONVILLE, FL 32204 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: JOSEPH E PENCE STD 04/29/2003
Electronic Signature of Signing Officer or Director Date