2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000003719

Entity Name: NELCO ONE, INC.

FILED Apr 07, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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339 6TH AVENUE WEST
BRADENTON, FL 34205
339 6TH AVENUE WEST
BRADENTON, FL 34205 US

Current Mailing Address: New Mailing Address:

339 6TH AVENUE WEST BRADENTON, FL 34205 339 6TH AVENUE WEST BRADENTON, FL 34205 US

FEI Number: 65-0804810 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:

DORRIS, VIRGINIA A
339 6TH AVENUE WEST
BRADENTON, FL 34205

DORRIS, VIRGINIA A
339 6TH AVENUE WEST
BRADENTON, FL 34205

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: 04/07/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 DORRIS, VIRGINIA A
 Name:
 DORRIS, VIRGINIA A

 Address:
 339 6 AVE W
 Address:
 339 6 AVE W

City-St-Zip: BRADENTON, FL 34205 City-St-Zip: BRADENTON, FL 34205 US

Title: VPSD () Delete Title: VSTD (X) Change () Addition

 Name:
 RATH, DORI
 Name:
 RATH, DORI

 Address:
 339 6TH AVE W
 Address:
 339 6TH AVE W

City-St-Zip: BRADENTON, FL 34205 City-St-Zip: BRADENTON, FL 34205 US

Title: D (X) Delete Title: () Change () Addition

 Name:
 RATH, MICHAEL
 Name:

 Address:
 339 6TH AVE W
 Address:

 City-St-Zip:
 BRADENTON, FL 34205
 City-St-Zip:

Title: TD (X) Delete Title: () Change () Addition

 Name:
 RATH, ROBERT D
 Name:

 Address:
 339 6TH AVE W
 Address:

 City-St-Zip:
 BRADENTON, FL 34205
 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: VIRGINIA A. DORRIS PRES 04/07/2003