

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000016905

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: TCB UNIVERSAL, INC.

Current Principal Place of Business:

85 MARK DAVID CT
CASSELBERRY, FL 32707

New Principal Place of Business:

1086 SHAWNEE TR
WINTER SPRINGS, FL 32708

Current Mailing Address:

85 MARK DAVID CT
CASSELBERRY, FL 32707

New Mailing Address:

1086 SHAWNEE TR
WINTER SPRINGS, FL 32708

FEI Number: 59-3494057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTERS, MELVIN R
85 MARK DAVID CT
CASSELBERRY, FL 32707

Name and Address of New Registered Agent:

WALTERS, MELVIN R
1086 SHAWNEE TR
WINTER SPRINGS, FL 32708

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:

04/29/2002

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:

Title: PTD () Delete
Name: WALTERS, MELVIN R
Address: 85 MARK DAVID COURT
City-St-Zip: CASSELBERRY, FL 32707

Title: VSD () Delete
Name: WALTERS, KATHLEEN P
Address: 85 MARK DAVID COURT
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: WALTERS, MELVIN R
Address: 1086 SHAWNEE TR
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VSD (X) Change () Addition
Name: WALTERS, KATHLEEN P
Address: 1086 SHAWNEE TR
City-St-Zip: WINTER SPRINGS, FL 32708

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: MELVIN R. WALTERS

PTD

04/29/2002

Electronic Signature of Signing Officer or Director

Date