

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000020319

FILED  
Apr 14, 2003  
Secretary of State

**Entity Name:** COLLEEN MCCANN KETTLES, ATTORNEY AT LAW, P.A.

**Current Principal Place of Business:**

145 WEKIVA SPRINGS RD., SUITE 187  
LONGWOOD, FL 32779

**New Principal Place of Business:**

101 COVE LAKE DRIVE  
LONGWOOD, FL 32779

**Current Mailing Address:**

145 WEKIVA SPRINGS RD., SUITE 187  
LONGWOOD, FL 32779

**New Mailing Address:**

101 COVE LAKE DRIVE  
LONGWOOD, FL 32779

**FEI Number:** 59-3497149

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

KETTLES, COLLEEN M  
145 WEKIVA SPRINGS RD., SUITE 187  
LONGWOOD, FL 32779

**Name and Address of New Registered Agent:**

KETTLES, COLLEEN M  
101 COVE LAKE DRIVE  
LONGWOOD, FL 32779

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:** COLLEEN KETTLES

04/14/2003

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

**Title:** P/D ( ) Delete  
**Name:** KETTLES, COLLEEN M  
**Address:** 145 WEKIVA SPRINGS RD., SUITE 187  
**City-St-Zip:** LONGWOOD, FL 32779

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** P/D (X) Change ( ) Addition  
**Name:** KETTLES, COLLEEN M  
**Address:** 101 COVE LAKE DRIVE  
**City-St-Zip:** LONGWOOD, FL 32779

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:** COLLEEN KETTLES

P/D

04/14/2003

Electronic Signature of Signing Officer or Director

Date