2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2002 8:00 AM
Secretary of State

DOCUMENT# P98000043042

Entity Name: EXHEDRA SOLUTIONS, INC.

Current Principal Place of Business:

1209 LA BRAD LANE
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

1209 LA BRAD LANE
TAMPA, FL 33613

New Mailing Address:

FEI Number: 59-3510883 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSE, BRENDA
405 CENTRAL AVE STE 200
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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: _____

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: P ( ) Delete
Name: IPPOLITO, IAN
Address: 1209 LA BRAD LANE
City-St-Zip: TAMPA, FL 33613

Title: T ( ) Delete
Name: EDGINGTON, JUDI
Address: 1840 MILL RUN CIRCLE
City-St-Zip: TAMPA, FL 33613

Title: SRVP ( ) Delete
Name: IPPOLITO, DAWN
Address: 106 THOMPSON PARK HALL
City-St-Zip: UNIVERSITY PARK, PA 16802

Title: VP ( ) Delete
Name: IPPOLITO, KIM
Address: 720 THORNWICK DRIVE
City-St-Zip: PITTSBURGH, PA 15243

Title: VP ( ) Delete
Name: IPPOLITO, COREY
Address: 1000 SOUTH ROAD APT. 3
City-St-Zip: BELMON, CA 94002

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: JUDI EDGINGTON T 04/28/2002

Electronic Signature of Signing Officer or Director Date