2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2003
Secretary of State

DOCUMENT# P98000104632

Entity Name: JOSEPH W. WATSON, P.A.

Current Principal Place of Business:

1820 LAKE CYPRESS DRIVE
SAFETY HARBOR, FL 34695

New Principal Place of Business:

1700 CYPRESS TRACE DR
SAFETY HARBOR, FL 34695

Current Mailing Address:

1820 LAKE CYPRESS DRIVE
SAFETY HARBOR, FL 34695

New Mailing Address:

1700 CYPRESS TRACE DR
SAFETY HARBOR, FL 34695

FEI Number: 59-3550946 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WATSON, JOSEPH W
1820 LAKE CYPRESS DRIVE
SAFETY HARBOR, FL 34695

Name and Address of New Registered Agent:

WATSON, JOSEPH W
1700 CYPRESS TRACE DR
SAFETY HARBOR, FL 34695

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: J WATSON 04/08/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WATSON, JOSEPH W
Address: 1820 LAKE CYPRESS DRIVE
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: WATSON, JOSEPH W
Address: 1700 CYPRESS TRACE DR
City-St-Zip: SAFETY HARBOR, FL 34695

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: J WATSON PRES 04/08/2003
Electronic Signature of Signing Officer or Director — Date