

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000107863

FILED  
Feb 16, 2003  
Secretary of State

**Entity Name:** GRAPHIC COMMUNICATION MANAGEMENT, INC.

## Current Principal Place of Business:

215 CELEBRATION PLACE  
SUITE 500  
CELEBRATION, FL 34747

## New Principal Place of Business:

221 EASTPARK DRIVE  
SUITE B  
CELEBRATION, FL 34747

## Current Mailing Address:

215 CELEBRATION PLACE  
SUITE 500  
CELEBRATION, FL 34747

## New Mailing Address:

221 EASTPARK DRIVE  
SUITE B  
CELEBRATION, FL 34747

**FEI Number:** 59-3550247

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## Name and Address of Current Registered Agent:

JOHNSON, MICHAEL  
221B EAST PARK DRIVE  
CELEBRATION, FL 34747 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

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

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: JOHNSON, MICHAEL J  
Address: 221B EAST PARK DRIVE  
City-St-Zip: KISSIMMEE, FL 34747

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOD (X) Change ( ) Addition  
Name: JOHNSON, MICHAEL J  
Address: 221B EAST PARK DRIVE  
City-St-Zip: CELEBRATION, FL 34747 US

Title: PTD ( ) Change (X) Addition  
Name: JOHNSON, TAMARA A  
Address: 221B EAST PARK DRIVE  
City-St-Zip: CELEBRATION, FL 34747

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: TAMARA A JOHNSON

PTD

02/16/2003

Electronic Signature of Signing Officer or Director

Date