## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000065042

City-St-Zip:

LANTANA, FL 33462

Entity Name: MANAGEMENT SERVICES OF AMERICA INC.

FILED Jul 01, 2003 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
639 E. OC SUITE 204 BOYNTON		33435					
Current Mailing Address:				New Mailing Address:			
639 E. OC SUITE 204 BOYNTON		33435					
FEI Number:	65-0941240	FEI Number Applied For ( )	FEI Nur	nber Not Appli	cable ( )	Certificate of Status Des	ired()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
FISHMAN, KIMBERLY L 10176 SOUTHERN RIDGE PLACE LAKE WORTH, FL 33467 US				FISHMAN, KIMBERLY L 639 E. OCEAN AVENUE #204 BOYNTON BEACH, FL 33435 US			
	named entity of Florida.	submits this statement for the	e purpose o		,		nt, or both,
SIGNATURE:				07/01/2003			
Electronic Signature of Registered Agent				Date			
	mpaign Financir S AND DIREC	ng Trust Fund Contribution().		ADDITION	S/CHANGE	S TO OFFICERS AND I	DIRECTORS:
Title: Name: Address: City-St-Zip:	HUCKABY, JA 7187 THOMPS			Title: Name: Address: City-St-Zip:	HUCKABY, JA 7187 THOMP		
Title: Name: Address: City-St-Zip:	ADLER, MARS 8694 INDIAN F			Title: Name: Address: City-St-Zip:	ADLER, JOH 8694 INDIAN		
Title: Name: Address:	V () WHITE, SHIRL 6820 EAST VII			Title: Name: Address:	(	) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: JANET HUCKABY P 07/01/2003