

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000095823

FILED
Apr 04, 2003
Secretary of State

Entity Name: ADVANCED TRAFFIC CONTROL, INC.

Current Principal Place of Business:

1515 UNIVERSITY DRIVE
SUITE 105
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

1515 UNIVERSITY DRIVE
SUITE 105
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 59-3604997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAFFER, ROGER L VP
1515 UNIVERSITY DRIVE
SUITE 105
CORAL SPRINGS, FL 33071

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: P () Delete
Name: ROARK, FRANK L
Address: 1515 UNIVERSITY DR. STE. 105
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: ROARK, FRANK L
Address: 9271 SOUTHWEST 18TH ROAD
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: SHAFFER, ROGER L
Address: 1515 UNIVERSITY DR., SUITE 105
City-St-Zip: CORAL SPRINGS, FL 33071 BR

Title: VP () Delete
Name: SHAFFER, ROGER L
Address: 1515 UNIVERSITY DR., SUITE 105
City-St-Zip: CORAL SPRINGS, FL 33071 BR

Title: S () Delete
Name: SHAFFER, ROGER L
Address: 1515 UNIVERSITY DR., SUITE 105
City-St-Zip: CORAL SPRINGS, FL 33071 BR

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: ROGER L. SHAFFER

VP

04/04/2003

Electronic Signature of Signing Officer or Director

Date