

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000099067

FILED  
Apr 30, 2002 8:00 AM  
Secretary of State

Entity Name: THE WORK HOUSE, INC.

## Current Principal Place of Business:

18830 US 19 NORTH  
STE 324  
CLEARWATER, FL 33764

## New Principal Place of Business:

5623 BAYOU GRANDE BLVD. N. E.  
ST.PETERSBURG, FL 33703 US

## Current Mailing Address:

18830 US 19 NORTH  
STE 324  
CLEARWATER, FL 33764

## New Mailing Address:

P.O. BOX 55476  
ST.PETERSBURG, FL 33732 US

FEI Number: 59-3607675

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOGUCKI, LISA A  
312 BARBARA CIRCLE  
BELLEAIR, FL 33756

## Name and Address of New Registered Agent:

PARKER, LISA A  
5623 BAYOU GRANDE BLVD. N.E.  
ST. PETERSBURG, FL 33703 US

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: LISA A. PARKER

04/30/2002

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: PD ( ) Delete  
Name: KOGUCKI, LISA A  
Address: 312 BARBARA CIRCLE  
City-St-Zip: BELLEAIR, FL 33756

Title: VD ( ) Delete  
Name: PARKER, ANDREW R  
Address: 312 BARBARA CIRCLE  
City-St-Zip: BELLEAIR, FL 33756

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: PARKER, LISA A  
Address: 5623 BAYOU GRANDE BLVD. N.E.  
City-St-Zip: ST.PETERSBURG, FL 33703 US

Title: VD (X) Change ( ) Addition  
Name: PARKER, ANDREW R  
Address: 5623 BAYOU GRANDE BLVD. N.E.  
City-St-Zip: ST.PETERSBURG, FL 33703 US

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: LISA A.PARKER

PRES

04/30/2002

Electronic Signature of Signing Officer or Director

Date