2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2002 8:00 AM
Secretary of State

DOCUMENT# P99000109453

Entity Name: SPINNAKER FINANCIAL SERVICES, INC.

Current Principal Place of Business:

4505 FERNCROFT CIRCLE
TAMPA, FL 33629

New Principal Place of Business:

904 ADDISON DRIVE NE
ST. PETERSBURG, FL 33617

Current Mailing Address:

4505 FERNCROFT CIRCLE
TAMPA, FL 33629

New Mailing Address:

904 ADDISON DRIVE NE
ST. PETERSBURG, FL 33617

FEI Number: 59-3615941 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, HAL R
4505 FERNCROFT CIRCLE
TAMPA, FL 33629

Name and Address of New Registered Agent:

RITCHIE, LOUIS M
904 ADDISON DRIVE NE
ST. PETERSBURG, FL 33617

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: LOUIS M. RITCHIE 04/27/2002
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: JOHNSON, HAL R
Address: 4505 FERNCROFT CIRCLE
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: RITCHIE, LOUIS M
Address: 904 ADDISON DRIVE NE
City-St-Zip: ST. PETERSBURG, FL 33617

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: LOUIS M. RITCHIE PD 04/27/2002
Electronic Signature of Signing Officer or Director Date