2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2003
Secretary of State

DOCUMENT# V14913

Entity Name: THE GINGERBREAD TRIM COMPANY

Current Principal Place of Business:

23264 HARBORVIEW
PORT CHARLOTTE, FL 33980 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 496200
PORT CHARLOTTE, FL 339496200 US

New Mailing Address:

FEI Number: 65-0324708 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMPBELL, CLIF R P
29062 RIVERVIEW LANE
PUNTA GORDA, FL 33982 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: P ( ) Delete
Name: CAMPBELL, CLIF R
Address: 29062 RIVERVIEW LANE
City-St-Zip: PUNTA GORDA, FL 33982

Title: VS ( ) Delete
Name: CAMPBELL, BETSY J
Address: 29062 RIVERVIEW LANE
City-St-Zip: PUNTA GORDA, FL 33982

Title: D ( ) Delete
Name: KLINE, JOHN E
Address: 2271 N ST LUCIE POINT
City-St-Zip: HERNANDO, FL 34442

Title: D ( ) Delete
Name: HOPPLE, WILLIAM C
Address: 4230 UTE COURT
City-St-Zip: ESTERO, FL 33928

Title: D ( ) Delete
Name: YOUNG, NANCY E
Address: 320 WINDY ROW
City-St-Zip: W. PETERBOROUGH, NH 03468

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: CLIF CAMPBELL P 04/29/2003

Electronic Signature of Signing Officer or Director Date