

2000 UNIFORM BUSINESS REPORT (UBR)

3/2/

FILED
Apr 24, 2000 8:00 am
Secretary of State

03-02-2000 90073 047 ****61.25

DOCUMENT # N97000004960

1. Entity Name

HERNANDO COMPUTER CLUB, INC.

Principal Place of Business

Mailing Address

POST OFFICE BOX 6392
 SPRING HILL FL 34611

POST OFFICE BOX 6392
 SPRING HILL FL 34611-6392



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3483756

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERGERON, RICHARD L
1460 ALAMEDA DR
SPRING HILL FL 34609

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	KAZMERSKI, ROBERT E	
STREET ADDRESS	27225 OLD SPRINGS LAKE ROAD	
CITY-ST-ZIP	BROOKSVILLE FL 34602	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	ELWINE, EUGENE	
STREET ADDRESS	2284 MARIETTA AVE	
CITY-ST-ZIP	SPRING HILL FL 34608	
TITLE	S	<input type="checkbox"/> Delete
NAME	BERGERON, DICK	
STREET ADDRESS	1460 ALAMEDA DR	
CITY-ST-ZIP	SPRING HILL FL 34609	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	NADEAU, GEORGE	
STREET ADDRESS	13155 DELBARTON ST	
CITY-ST-ZIP	SPRING HILL FL 34609	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BROTHERS, NEIL	
STREET ADDRESS	9096 JENA AD	
CITY-ST-ZIP	SPRING HILL FL 34608	
TITLE	D	<input type="checkbox"/> Delete
NAME	WINNER, NORMA	
STREET ADDRESS	9277 REGATTA CIRCLE	
CITY-ST-ZIP	SPRING HILL FL 34606	

TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VANDERVLIS, GERRY	
STREET ADDRESS	10385 LOCKER DR	
CITY-ST-ZIP	SPRING HILL FL 34608	
TITLE	VP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERGERON, RICHARD	
STREET ADDRESS	1460 ALAMEDA DR	
CITY-ST-ZIP	SPRING HILL FL 34609	
TITLE	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRISON, KENNETH	
STREET ADDRESS	6181 OCEAN PINES LN	
CITY-ST-ZIP	SPRING HILL FL 34606	
TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COPP, JOE	
STREET ADDRESS	2487 RUNNING OAK CT	
CITY-ST-ZIP	SPRING HILL FL 34608	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHNEIDER, ROBERT	
STREET ADDRESS	7353 DOAWOOD CRST	
CITY-ST-ZIP	SPRING HILL FL 34607	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PRESIDENT

Richard L. Bergeron

3/20/00

(352) 686-9673

CR2E037 (9/99)