

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90062 010 ****61.25

DOCUMENT # N97000000244

1. Entity Name

LIBRARY AND INFORMATION RESOURCES NETWORK, INC.**LUUJ833Z**

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address

7855 126TH AVE NORTH 7855 126TH AVE NORTH
STE F STE F
LARGO FL 33773 LARGO FL 33733
US US

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **65-0767267** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

JONES, DONALD C
1685 MEDICAL LANE
FORT MYERS FL 33907-1157

7. Name and Address of New Registered Agent

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 ☐ **\$5.00** May Be
Trust Fund Contribution. Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
V	ALPHONSO, JORGE	6840 S.W. 40 STREET	MIAMI FL 33155	<input checked="" type="checkbox"/>
D	GAYLE, JANET	600 TAYLOR STREET	JOLIET IL 60435	<input type="checkbox"/>
PD	DUGAN, PATRICK K	419 BELLE PT. DRIVE	ST PETE BEACH FL 33706	<input type="checkbox"/>
D	HASTREITER, JAMIE	4200 54TH AVENUE SOUTH	ST PETERSBURG FL 33711	<input type="checkbox"/>
D	KOON, WILEY	3319 WEST HILLSBOROUGH AVENUE	TAMPA FL 33614	<input type="checkbox"/>
D	TIPSWORD, TOM	600 S CLYDE MORRIS BLVD	DAYTONA BEACH FL 32114	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
TD	Devaux, Douglas F.	3693 Imperial Ridge Pkwy.	Palm Harbor, FL 34684	<input type="checkbox"/>	<input type="checkbox"/>
D	Jennings, Tuny	39 Le Tourneau Circle	Hurlburt Field, FL 32544	<input type="checkbox"/>	<input type="checkbox"/>
SD	Faulkner, Mary	17250-8 Eagle Trace	Et. Myers, FL 33908	<input type="checkbox"/>	<input type="checkbox"/>
D	Butler, Henry	2900 N. W. 31st Terrace	Gainesville, FL 32605	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VD	Koon Wiley	995 E. Memorial Blvd.	Lakeland, FL 33801	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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 OF Douglas F. Devaux **March 20, 2001** (727) 536-0214
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #