

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 669910

1. Entity Name

V-GPO, Inc.

FILED

02 MAY 22 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
36 KLEIN RD.
WILLIAMSVILLE NY 14221-1706

Mailing Address
36 KLEIN RD.
WILLIAMSVILLE NY 14221-1706



05/21/02 90895-035 \$150.00

2. Principal Place of Business
2150 Whitfield Industrial Way

3. Mailing Address
2150 Whitfield Industrial Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Sarasota, FL

City & State
Sarasota, FL

4. FEI Number
59-1997186

Applied For
Not Applicable

Zip
34243

Country
USA

Zip
34243

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JASZEWSKI, PATRICK F
5930 D ARMSTRONG ROAD
ELKTON FL 32033

Name
Capital Connection, Inc.
Street Address (P.O. Box Number is Not Acceptable)
417 E. Virginia St., Suite 1
City
Tallahassee FL Zip Code
32301

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JASZEWSKI, CASIMER J 36 KLEIN ROAD WILLIAMSVILLE NY 14221	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JASZEWSKI, PATRICK F 5930 ARMSTRONG ROAD ELKTON FL 32033	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD JASZEWSKI, HELLA T 36 KLEIN ROAD WILLIAMSVILLE NY 14221	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CSD Norman R. Dobiesz 2150 Whitfield Industrial Way Sarasota, FL 34243	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD Samuel A. Greco 5525 North MacArthur Blvd., Suite 680 Irving, TX 75038	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Edwin E. Carty, Jr. 5525 North MacArthur Blvd., Suite 680 Irving, TX 75038	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Michael J. Kuhn 5525 North MacArthur Blvd., Suite 680 Irving, TX 75038	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/02 941-727-8822

CR2E034 (9/01)