

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000002723

FILED
Feb 17, 2003
Secretary of State

Entity Name: SPRUCE COMPUTER SYSTEMS, INC.

Current Principal Place of Business:

17 BRITISH AMERICAN BLVD
LATHAM, NY 12110

New Principal Place of Business:

Current Mailing Address:

17 BRITISH AMERICAN BLVD
LATHAM, NY 12110

New Mailing Address:

FEI Number: 14-1670373 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MCQUADE, RAYMOND P
Address: 17 BRITISH AMERICAN BLVD
City-St-Zip: LATHAM, NY 12110 US

Title: S () Delete
Name: TIFFT, MARY J
Address: 17 BRITISH AMERICAN BLVD
City-St-Zip: LATHAM, NY 12110 US

Title: D () Delete
Name: DONOVAN, TOM
Address: 11 BRITISH AMERICAN BLVD
City-St-Zip: LATHAM, NY 12110 US

Title: D () Delete
Name: FITZPATRICK, ROB
Address: 17 BRITISH AMERICAN BLVD
City-St-Zip: LATHAM, NY 12110 US

Title: D () Delete
Name: HALLGREN, JON
Address: 885 ROUTE 67
City-St-Zip: BALLSTON SPA, NY 12020 US

Title: D () Delete
Name: WARNER, JOHN
Address: 4 CORNERS RD
City-St-Zip: SHERBURNE, NY 13460 US

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
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Address:
City-St-Zip:

Title: () Change () Addition
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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: MARY JANE TIFFT

_____ Electronic Signature of Signing Officer or Director

SEC

02/17/2003

_____ Date

JAN NOVACK, DIRECTOR
PO BOX 157
WEEHAWKEN, NJ 07087