

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F99000002925

FILED  
Apr 02, 2003  
Secretary of State

Entity Name: BACK TO BACK, INCORPORATED

## Current Principal Place of Business:

P O BOX 5158  
NAVARRE, FL 32566

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 5158  
NAVARRE, FL 32566

## New Mailing Address:

FEI Number: 59-3535062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUGLIOTTA, RONALD  
2012 COSTA VERDE COURT  
NAVARRE, FL 32566 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: GUGLIOTTA, RONALD  
Address: 2012 COSTA VERDE CT  
City-St-Zip: NAVARRE, FL 32566

Title: V ( ) Delete  
Name: GUGLIOTTA, TONI  
Address: 2075 FOUNTAINVIEW DRIVE  
City-St-Zip: NAVARRE, FL 32566

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: GUGLIOTTA, GINGER  
Address: 2012 COSTA VERDE CT  
City-St-Zip: NAVARRE, FL 32566

Title: S ( ) Change (X) Addition  
Name: GUGLIOTTA, GINGER  
Address: 2012 COSTA VERDE CT  
City-St-Zip: NAVARRE, FL 32566

Title: N/A ( ) Change (X) Addition  
Name: N/A, N/A  
Address: N/A  
City-St-Zip: N/A, N/ N/A

Title: N/A ( ) Change (X) Addition  
Name: N/A, N/A  
Address: N/A  
City-St-Zip: N/A, N/ N/A

Title: T ( ) Change (X) Addition  
Name: GUGLIOTTA, RONALD  
Address: 2012 COSTA VERDE CT.  
City-St-Zip: NAVARRE, FL 32566

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: RONALD GUGLIOTTA

P

04/02/2003

Electronic Signature of Signing Officer or Director

Date