

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J50066

FILED  
Apr 07, 2002 8:00 AM  
Secretary of State

Entity Name: COMPUTER SUPPORT RESOURCES INCORPORATED

## Current Principal Place of Business:

RR 12 BOX 479-6  
LAKE CITY, FL 32025 US

## New Principal Place of Business:

## Current Mailing Address:

RR 12 BOX 479-6  
LAKE CITY, FL 32025 US

## New Mailing Address:

FEI Number: 59-2754212

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRYMAN, MELINDA L  
RT 12, BOX 479-6  
LAKE CITY, FL 32025 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete  
Name: FUTCH, HOLLIS V.  
Address: RT 3 BOX 27219 CLARENCE LOYD DR  
City-St-Zip: LAKE CITY, FL 32025

Title: STD ( ) Delete  
Name: FUTCH, MARY E.  
Address: RT 3 BOX 27219 CLARENCE LOYD DR  
City-St-Zip: LAKE CITY, FL 33025

Title: STD ( ) Delete  
Name: FRYMAN, MELINDA L  
Address: RT 12, BOX 479-6  
City-St-Zip: LAKE CITY, FL 32025

Title: PD ( ) Delete  
Name: FRYMAN, THEODORE A  
Address: RT 12 BOX 479-6  
City-St-Zip: LAKE CITY, FL 32025

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition  
Name: FUTCH, HOLLIS V.  
Address: RT 3 BOX 27219  
City-St-Zip: LAKE CITY, FL 32025

Title: STD (X) Change ( ) Addition  
Name: FUTCH, MARY E.  
Address: RT 3 BOX 27219  
City-St-Zip: LAKE CITY, FL 33025

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: MELINDA L. FRYMAN

STD

04/07/2002

Electronic Signature of Signing Officer or Director

Date