

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 21, 2001 8:00 am**  
**Secretary of State**

09-21-2001 90010 001 \*\*\*150.00

AV 9980100

**DOCUMENT # J77433**

1. Entity Name  
**BOARD XCHANGE, INC.**

LA

Principal Place of Business  
**2262 KING JAMES CT**  
**WINTER PARK FL 32792**  
**US**

Mailing Address  
**P.O. BOX 1633**  
**WINTER PARK FL 32790-1633**  
**US**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
**2262 King James Ct**  
 Suite, Apt. #, etc.

City & State  
**Winter Park FL**

4. FEI Number **59-2805763**  
 Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**SPEICHER, TERRY L.**  
**2262 KING JAMES COURT**  
**WINTER PARK FL 32792**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SPEICHER, TERRY L.</b> <b>2262 KING JAMES COURT</b> <b>WINTER PARK FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SPEICHER, SUSAN W.</b> <b>2262 KING JAMES COURT</b> <b>WINTER PARK FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 like empowered.

SIGNATURE: SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**09/15/01** **407 252-7003**  
 Date Daytime Phone #

CR2E034 (5/01)



Attachment  
DH#J7433  
AO87087

Dear Sirs;

I am at a loss to understand how only the "important notice " Uniform Business document got to me, as I understand other more usual and less expensive documents preceded this one. So as a very small business owner who would like to keep his corporation on the books (if somewhat in active, in these troubled times ) I ask that you accept this submission.

Sincerely,  
Terry L Speicher

*Terry L Speicher*