2001 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # L08877** 1. €ntity Name BETTER BUSINESS FORMS, INC. Principal Place of Business Mailing Address 10950 BELCHER ROAD 10950 BELCHER ROAD LARGO FL 33777 P.O. BOX 250 PINELLAS PARK FL 33780-250 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

Zip

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

FILED Feb 08, 2001 8:00 am Secretary of State

02-08-2001 90183 034 ***150.00



11.	OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TI			
TITLE	CD	☐ Delete	TITLE		Change	☐ Addition
NAME	MCDERMOTT, NORBERT		NAME			
STREET ADDRESS	10950 BELCHER ROAD		STREET ADDRESS			ì
CITY-ST-ZIP	LARGO FL 33777		CITY-ST-ZIP			
TITLE	D	☐ Delete	TITLE		Change	☐ Addition
NAME	HOGAN, PAUL		NAME ,			,
STREET ADDRESS	10950 BELCHER ROAD		STREET ADDRESS			
CITY-ST-ZIP	LARGO FL		CITY-ST-ZIP	<u>-</u>		
TITLE	PD	☐ Delete	TITLE		Change	☐ Addition
NAME	BAKER, JOSEPH P.		NAME			
STREET ADDRESS	10950 BELCHER ROAD		STREET ADDRESS			
CITY-ST-ZIP	LARGO FL		CITY-ST-ZIP			,
TITLE	STD	☐ Delete	TITLE		Change	☐ Addition
NAME	KELLER, GARY W.		NAME			
STREET ADDRESS	10950 BELCHER ROAD		STREET ADDRESS			{
CITY-ST-ZIP	LARGO FL		CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		Change	☐ Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			,
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		Change	☐ Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
3. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07/33(i). Florida Statutes: I further certify that the information						

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

Name

Thereby certify that the information supplied with this liming does not quality 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:

Zip

SIGNATURE

(See criteria on back)

KELLER, GARY W

10950 BELCHER ROAD **LARGO FL 33777**

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

CR2E034 (10/00)