2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 02, 2002 8:00 AM
Secretary of State

DOCUMENT# N00000000613

Entity Name: THE SPHERIAN PARTNERSHIP, INC.

Current Principal Place of Business:

4507 SW 83RD DRIVE
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

4507 SW 83RD DRIVE
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-3639204 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRENGER, JOSEPH
4507 SW 83RD DRIVE
GAINESVILLE, FL 32608

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PRENGER, JOSEPH
Address: 4507 SW 83RD DR
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete
Name: CLARK, MARK
Address: 16217 NW 74TH AVE
City-St-Zip: ALACHUA, FL 32615

Title: D ( ) Delete
Name: COHEN, MATTHEW
Address: 13307 THOMAS LANE
City-St-Zip: ANACORTES, WA 98221

Title: D ( ) Delete
Name: OSBORNE, TODD
Address: 817 NW 15TH AVE
City-St-Zip: GAINESVILLE, FL 32601

Title: D ( ) Delete
Name: MCWALTER, KERRY
Address: 525 NW 19TH LANE
City-St-Zip: GAINESVILLE, FL 32609

Title: D ( ) Delete
Name: STEVENS, MICHAEL
Address: 3935 NW 27TH LANE
City-St-Zip: GAINESVILLE, FL 32606

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
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH PRENGER D 02/02/2002

Electronic Signature of Signing Officer or Director Date