## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # N00507**

1. Entity Name

HP FLORIDA REGIONAL USERS GROUP \FLORUG\, INC.



**FILED** Apr 25, 2003 8:00 am Secretary of State

04-25-2003 90237 023 \*\*\*\*70.00

Florida Department of State

☐ Change

Principal Place of Business Maili		Mailing Address	illing Address					
****		15016 GREELEY DRIVE TAMPA FL 33625			· ***			
2. Principal Place of Business 3. N Suite, Apt. #, etc.		3. Mailing Address	3. Mailing Address		1 188111181 811 881111 8			
		Suite, Apt. #, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State		City & State	City & State		39 240 1070		Applied For Not Applicable	
Zip	Country	Zip	Соц	untry	5. Certificate of Status	s Desired 🕱	\$8.75 Additional Fee Required	
6. Name	and Address of Curi	rent Registered Agent			7. Name and Addres	s of New Registered	l Agent	
				Name				
EDELSON, JEFF 15016 GREELEY DRIVE TAMPA FL 33625				Street Address (P.O. Box Number is Not Acceptable)				
				City		F	L Zip Code	
<ol> <li>The above named entity the obligations of regist</li> </ol>		nt for the purpose of changing	its register	ed office or registe	red agent, or both, in the	State of Florida. I an	n familiar with, and accept	
SIGNATURE								
Signature, typed	or printed name of registered a	agent and title if applicable. (N	OTE: Registere	d Agent signature require	d when reinstating)	DATE		
FILE NOW	: FEE IS \$61.25	9. Election C	ampaign F	inancing	<b>\$5.00</b> May Be	Make Che	ck Payable to	

10.	OFFICERS AND DIRECTORS 11. ADDITIONS/CHANG			ADDITIONS/CHANGES TO OFFICERS AND	SES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	🖳 Delete	TITLE	PD	Change	Addition	
NAME	LEBLANC, PAUL		NAME	Randy Breitfelder 3461 Snowy Egret Ct.			
STREET ADDRESS	500 TRINITY LANE #4210		STREET ADDRESS	3461 Śnowy Egret Ct.			
CITY-ST-ZIP	SAINT:PETERSBURG FL 33716			Palm Harbor, FL 34683			
TITLE	STD /	☐ Delete	TITLE	TD.	🔀 Change	Addition	
NAME	EDELSON, JEFF		NAME	Jeff Edelson			
STREET ADDRESS	150 SCREELEV DRIVE	the state of the second	STREET ADDRESS	I SAIL KAROLOV Vrive	-		

Trust Fund Contribution.

CITY-ST-ZIP TAMPA FL 33625 **B** Delete TITLE Christina Cejka 6 Lake Eden Orive FRISNELL, DAVID NAME 3471 A NW 55ST STREET STREET ADDRESS FORT LAUDERDALE FL 33309

Boynton Beach, FL 33435 CITY-ST-ZIP ☐ Delete TITLE NAME STREET ADDRESS

Added to Fees

	CITY-ST-ZIP		
☐ Delete	TITLE	☐ Change	Addition
	NAME		
	STREET ADDRESS		

CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME

STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

813-829-8300

CR2E037 (10/02)

Addition

☐ Addition