

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 03, 2007 8:00 am
Secretary of State

03-21-2007 90026 050 ****61.25

DOCUMENT # N06000001998					
1. Entity Name BUCKS BUSINESS NETWORK, INC.					
Principal Place of Business 3490 E LAKE RD - STE B PALM HARBOR, FL 34685			Mailing Address 3490 E LAKE RD - STE B PALM HARBOR, FL 34685		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 33-1135145	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SULLIVAN, C A 311 S MISSOURI AVE CLEARWATER, FL 33756				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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution, ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MONTE, JOHN 3490 E LAKE RD - STE B PALM HARBOR, FL 34685	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Ott, Christina 2003 Shannon Cir Clearwater, FL 34684	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD BAHR, JANET 829 TIMBER LN TARPON SPRINGS, FL 34689	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD Gerald Goodwin 1743 Wood Trail St Dade City, FL 34608	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD NICHOLS, JAMES 101 PHILIPPS PKWY - STE 215 SAFETY HARBOR, FL 34695	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Dittman, Jennifer 4400 Serenity Trail Palm Harbor, FL 34685	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S KAGAN, MARILYN 3490 E LAKE RD - STE B PALM HARBOR, FL 34685	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Dittman, Jennifer 4400 Serenity Trail Palm Harbor, FL 34685	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S KAGAN, MARILYN 3490 E LAKE RD - STE B PALM HARBOR, FL 34685	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Dittman, Jennifer 4400 Serenity Trail Palm Harbor, FL 34685	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S KAGAN, MARILYN 3490 E LAKE RD - STE B PALM HARBOR, FL 34685	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Dittman, Jennifer 4400 Serenity Trail Palm Harbor, FL 34685	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____			3/1/07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		

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