

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001998

FILED
Mar 01, 2008
Secretary of State

Entity Name: BUCKS BUSINESS NETWORK, INC.

Current Principal Place of Business:

3490 E LAKE RD - STE B
PALM HARBOR, FL 34685

New Principal Place of Business:

Current Mailing Address:

3490 E LAKE RD - STE B
PALM HARBOR, FL 34685

New Mailing Address:

FEI Number: 33-1135145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, C A
311 S MISSOURI AVE
CLEARWATER, FL 33756 US

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: PD () Delete
Name: OTT, CHRISTINA
Address: 2993 SHANNON CIR
City-St-Zip: PALM HARBOR, FL 34684

Title: VPD () Delete
Name: GOODWIN, GERALD
Address: 1743 WOOD TRAIL ST
City-St-Zip: TARPON SPRINGS, FL 34689

Title: TD () Delete
Name: NICHOLS, JAMES
Address: 101 PHILIPPS PKWY - STE 215
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S () Delete
Name: DIHMAN, JENNIFER
Address: 4422 SERENITY TRAIL
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FOX, LEON
Address: 2609 FALLSROCK DR.
City-St-Zip: CLEARWATER, FL 33761

Title: VPD (X) Change () Addition
Name: GALLAGER, KEVIN
Address: 550 ALTERNATE 19 NORTH
City-St-Zip: PALM HARBOR, FL 34683

Title: TD (X) Change () Addition
Name: OTT, CHRIS
Address: 29383 U.S. HIGHWAY 19 NORTH
City-St-Zip: CLEARWATER, FL 33761

Title: S (X) Change () Addition
Name: CAGLE, DARLENE
Address: 1919 DREW STREET
City-St-Zip: CLEARWATER, FL 33765

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LEON FOX

PD

03/01/2008

Electronic Signature of Signing Officer or Director

Date