

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 19, 2008
Secretary of State

DOCUMENT# N06000001998

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:**3490 E LAKE RD-STE B
PALM HARBOR, FL 34685**Current Mailing Address:**3490 E LAKE RD - STE B
PALM HARBOR, FL 34685**New Mailing Address:**2993 SHANNON CIR
PALM HARBOR, FL 34684**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: FOX, LEON
Address: 2609 FALLSROCK DR.
City-St-Zip: CLEARWATER, FL 33761

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOGUE, DANNY
Address: 4701 BERWYN COURT
City-St-Zip: PALM HARBOR, FL 34685

Title: VPD (X) Change () Addition
Name: KAGAN, MARILYN
Address: 2395 FLINT LOCK DR
City-St-Zip: CLEARWATER, FL 33765

Title: TD (X) Change () Addition
Name: OTT, CHRIS
Address: 2993 SHANNON CIR
City-St-Zip: PALM HARBOR, FL 34684

Title: S (X) Change () Addition
Name: FIELDS, LAUREN
Address: 2460 GULF TO BAY BLVD
City-St-Zip: CLEARWATER, FL 33758

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: CHRIS OTT

TD

12/19/2008

Electronic Signature of Signing Officer or Director

Date