

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 30, 2009**  
**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 EAST LAKE ROAD  
SUITE B  
PALM HARBOR, FL 34685**Current Mailing Address:**2993 SHANNON CIR  
PALM HARBOR, FL 34684**New Mailing Address:**311 SOUTH MISSOURI AVENUE  
CLEARWATER, FL 33756**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:**SULLIVAN, C A  
311 SOUTH MISSOURI AVENUE  
CLEARWATER, FL 33756 US

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: \_\_\_\_\_

04/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: FOX, LEON  
Address: 3490 EAST LAKE ROAD, SUITE B  
City-St-Zip: PALM HARBOR, FL 34685

Title: SD (X) Change ( ) Addition  
Name: BAHR, JANET  
Address: 3490 EAST LAKE ROAD, SUITE B  
City-St-Zip: PALM HARBOR, FL 34685

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: C A SULLIVAN

RA

04/30/2009

Electronic Signature of Signing Officer or Director

Date