2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N16967

FILED Apr 26, 2003 Secretary of State

Entity Name: SARASOTA PERSONAL COMPUTER USER'S GROUP INC.

New Principal Place of Business: Current Principal Place of Business: %BARRY F. SPIVEY P.O. BOX 15889 SARASOTA, FL 342778889 **New Mailing Address: Current Mailing Address: %BARRY F. SPIVEY** P.O. BOX 15889 SARASOTA, FL 342778889 FEI Number: 59-2456855 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIVEY, BARRY F 1549 RINGLING BLVD. SUITE 600 SARASOTA, FL 34277 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete CUNNIE, JAMES PRES. WHITESELL, GEORGE PRES. Name: Name: 1102 BEN FRANKLIN DR 510 Address: 17706 HOWLING WOLF RUN Address: City-St-Zip: SARASOTA, FL 34236 US City-St-Zip: PARRISH, FL 34219 US Title: () Delete Title: (X) Change () Addition GERBER, DAVE DIRECT Name: MASON, CHARLES DIRECT Name: Address: 7424 CASS CIRCLE Address: 1279 VERMEER DRIVE City-St-Zip: SARASOTA, FL 34231 US City-St-Zip: NOKOMIS, FL 34275 US Title: () Delete Title: () Change () Addition KAISER, W M TREAS Name: Name: 7112 PINE NEEDLE ROAD Address: Address: City-St-Zip: SARASOTA, FL 34242 US City-St-Zip: Title: SD () Delete Title: VPD (X) Change () Addition Name: PLUTCHIK, ANITA SEC Name: RUMP, SHARON V PRES 4505 DEER CREEK BLVD 25 WHITE OAK TERRACE Address: Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: SARASOTA, FL 34237 US Title: () Delete Title: () Change () Addition HERTZ, HOPE DIRECT. Name: Name: 4198 OAKHURST CIRCLE WEST Address: Address: City-St-Zip: SARASOTA, FL 34233 US City-St-Zip: Title: () Delete Title: (X) Change () Addition KOONS, JERRY DIRECT. LEER, ROGER DIRECT. Name: Name: Address: 19 WHISPERING SANDS DR 902N Address: 4619 CHASE OAKS DRIVE

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: W. M. KAISER TREA 04/26/2003

SARASOTA, FL 34242

City-St-Zip:

SARASOTA, FL 34241 US