

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N24237

FILED
Aug 18, 2002
Secretary of State

Entity Name: TALLAHASSEE APPLE USER'S GROUP, INC.

Current Principal Place of Business:

P O BOX 14442
TALLAHASSEE, FL 323174442

New Principal Place of Business:

Current Mailing Address:

P O BOX 14442
TALLAHASSEE, FL 323174442

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

O'LARY, ROBERT M
2311 JIM LEE ROAD
TALLAHASSEE, FL 32301 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: KISSINGER, GARY
Address: 7642 MCCLURE DR.
City-St-Zip: TALLAHASSEE, FL

Title: VPD () Delete
Name: YATES, CHARLES
Address: 1204 GARDENIA DR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD () Delete
Name: GUNDERSON, CHRIS
Address: 2750 PINE RIDGE RD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: SD () Delete
Name: OSBORN, LINNIE
Address: 1406 NANCY DR.
City-St-Zip: TALLAHASSEE, FL 32301

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KISSINGER, GARY
Address: 7642 MCCLURE DR.
City-St-Zip: TALLAHASSEE, FL

Title: PD (X) Change () Addition
Name: YATES, CHARLES
Address: 1204 GARDENIA DR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: VPTD (X) Change () Addition
Name: MEGARGEE, ANN
Address: 524 TRUET DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: D (X) Change () Addition
Name: OSBORN, LINNIE
Address: 1406 NANCY DR.
City-St-Zip: TALLAHASSEE, FL 32301

Title: SD () Change (X) Addition
Name: WEININGER, MARC
Address: 403 BERKSHIRE DR
City-St-Zip: TALLAHASSEE, FL 32304

Title: D () Change (X) Addition
Name: WILLIAMS, GENE
Address: 4328 SNOOPY LANE
City-St-Zip: TALLAHASSEE, FL 32303

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.

SIGNATURE: ANN MEGARGEE

VPTD

08/18/2002

Electronic Signature of Signing Officer or Director

_____ Date