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Mar 07 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N40644 (9)

1. Corporation Name

TERMS USER GROUP, INC.



Principal Place of Business

C/O LORETTA W. BRUSTLIN
1960 LANDINGS BLVD
SARASOTA FL 34231
US

Mailing Address

C/O LORETTA W. BRUSTLIN
1960 LANDINGS BLVD
SARASOTA FL 34231-3302
US

3. Date Incorporated or Qualified
10/22/1990

3a. Date of Last Report
04/15/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number
65-0236801

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRUSTIN, LORETTA W
SARASOTA COUNTY SCHOOL BOARD
1960 LANDINGS BLVD
SARASOTA FL 34231

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MILLER, STEVE
STREET ADDRESS 40 ORANGE ST
CITY-ST-ZIP ST AUGUSTINE FL ☒ DELETE

TITLE D
NAME SHELL, ROBBY
STREET ADDRESS 603 CANAL ST
CITY-ST-ZIP MILTON FL ☐ DELETE

TITLE PD
NAME BEST, PEGGY M.
STREET ADDRESS 3710 ESTEY AVENUE
CITY-ST-ZIP NAPLES FL ☒ DELETE

TITLE STD
NAME BRUSTLIN, LORETTA W
STREET ADDRESS 1960 LANDINGS BLVD
CITY-ST-ZIP SARASOTA FL ☐ DELETE

TITLE D
NAME ROSSOW, LINDA
STREET ADDRESS 3350 FOREST HILL BLVD WING B-3
CITY-ST-ZIP WEST PALM BEACH FL ☐ DELETE

TITLE V
NAME MCGUFFEY, BRUCE
STREET ADDRESS 582 N TEMPLE AVE
CITY-ST-ZIP STARKE FL ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V/D
1.2 NAME REBECCA MYERS
1.3 STREET ADDRESS 919 N. BROAD ST.
1.4 CITY-ST-ZIP BROOKSVILLE, FL 34601 ☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE D
3.2 NAME ANN ALTMAN
3.3 STREET ADDRESS 301 4TH ST. N.W.
3.4 CITY-ST-ZIP LARGO, FL 34649 ☐ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE P/D
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Loretta W. Brustlin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/97

Date

941-937-9000
EXT 1350
Daytime Phone # 0062871

CR2E037 (9/96)