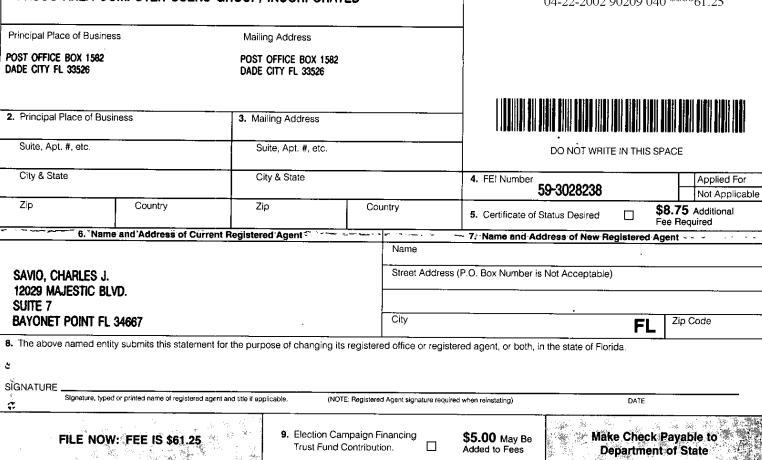
2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N46038 1. Entity Name PASCO AREA COMPUTER USERS GROUP, INCORPORATED Principal Place of Business Mailing Address POST OFFICE BOX 1582 POST OFFICE BOX 1582 DADE CITY FL 33526 DADE CITY FL 33526

FILED Apr 22, 2002 8:00 am § Secretary of State

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					and the second		
10.	OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	Į V	☑ Delete	TITLE	V	☐ Change	X Addition	
NAME	RUDISCHHAUSER, JOHN		NAME	Vesta, Mari e		_	
 STREET ADDRESS 	38708 9 AV		STREET ADDRESS	37640 Campo Ave			
CITY-ST-ZIP	ZEPHYRHILLS FL 33540		CITY-ST-ZIP	Zephyrhills, FL 33541			
TITLE	T	⊠ Delete	TITLE	S S	Change	Addition	
NAME	LEACH, NORMAN	/~ =	NAME	WAITE, MYRNA	Onlings	A TOURION	
STREET ADDRESS	5824 DEAN DAIRY RD		STREET ADDRESS	3539 FOX RUDGE BLVD		J	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541		CITY-ST-ZIP	ZEPHYRHILLS, FL 33543			
TITLE	XP	☐ Delete	TITLE	P		☐ Addition	
NAME	RIDER-NESS, JANET		NAME	Rider-Ness, JANET	*		
STREET ADDRESS	39048 10TH AVE		STREET ADDRESS	39048 10TH AVE			
CITY-ST-ZIP	ZEPHRYHILLS FL 33540		CITY-ST-ZIP	ZEPHYRHILLS, FL 33540			
TITLE	ØT	☐ Delete	TITLE	T		☐ Addition	
NAME	Stunkard, Virginia		NAME	STUNKARD, VIRGINIA			
STREET ADDRESS	37950 ASHBROOK RD		STREET ADORESS	37950 ASHBROOK ROAD		ľ	
CITY-ST-ZIP	DADE CITY FL 33523		CITY-ST-ZIP	DADE CITY, FL 33523			
TITLE	D	Delete	TITLE	D	☐ Change	K] Addition	
NAME	LINFIELD, MYRON	' `	NAME	WOODARD, WOODY			
STREET ADDRESS	35921 HERMBSO LN		STREET ADDRESS	41003 BEURY LANE			
CITY-ST-ZIP	ZEPHYRHILLS FL 33541		CITY-ST-ZIP	DADE CITY, FL 33525			
TITLE		☐ Delete	TITLE		☐ Change	Addition	
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				

12. I hereby certify that the information supplied with this filling does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

KaBEOUINEEDa Stunkard