2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N9300000727 1. Entity Name POLK COMPUTER USERS' GROUP, INC. Mailing Address Principal Place of Business PO BOXX6XXX 90404 PO BOX 5694 LAKELAND FL 32807,5694 LAKELAND FL 33807-5694 33804-0404 2. Principal Place of Business 3. Mailing Address P.O. Box 90404 D--- 00/0/

FILED Mar 02, 2001 8:00 am Secretary of State

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Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State Lakeland, FL 33804-0404		City & State		4. FEI Numbe	4. FEI Number 59-3170958		oplied For of Applicable	
Zip	Country	Zip Country		5. Certificate	5 Certificate of Status Desired \$8.75 Additional			
33804-0404 US 33804-0404 6. Name and Address of Current Registered Agent			US	US Fee Required 7. Name and Address of New Registered Agent				
	6. Name and Address of Current	negisierea Agent	Name	7. Name and	Address of New Register	ea Agent		
				David Zdanowicz				
HOOKE, WILBUR				Street Address (P.O. Box Number is Not Acceptable)				
5745 POIN	Ciana ave		- 333	Patterson St				
LAKELAND	FL 33809-3354							
			Lak	eland	F	Zip Cod 3380	e 3	
8. The above n	named entity submits this statement fo	r the purpose of changing its			th, in the state of Florida.			
	0, 121				Q.l	NZ1 20	a l	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE	: Registered Agent signs	iture required when reinstating)		TE		
	FILE NOW:	9. Election Campaign	Einanaina	05.00	Make Che	ali Davahla ti	_	
	FEE IS \$61.25	Trust Fund Contrib		\$5.00 May Be Added to Fees	1	ck Payable to ent of State	,	
	FEE 13 \$01.25			7,0000 10 7 000	Departin	em or orace		
10.	OFFICERS AND DI	RECTORS	11.	ADDITIONS/CH	ANGES TO OFFICERS AND	DIRECTORS IN	V 10	
TITLE	PD	Delete	TITLE	Pres.		☐ Change	Addition Addition	
NAME	CLAY, DALLAS		NAME	Bobby J. Sc	hnieder			
STREET ADDRESS	112 QUAILWOOD DR		STREET ADDRESS	4837 Ron Ci				
CITY-ST-ZIP	WINTER HAVEN FL 33880-4022		CITY-ST-ZIP	Lakeland, FL	33805-7568			
TITLE	VP	▼ Delete	TITLE	VP		☐ Change	☐ Additio	
NAME STREET ADDRESS	KINSEY, CHARLES 5834 DEERTRACK TRACE		NAME STREET ADDRESS	Bob Read				
CITY-ST-ZIP	LAKELAND FL 33811-2003		CITY-ST-ZIP	1123 Palace Lakeland, FL	Place			
TITLE	SD	▼ Delete	TITLE	Sec.	23013	☐ Change	Additio	
NAME	CLAY, LILA	Per Delete	NAME	Helen Kraft		☐ Olladige	☐ Additio	
STREET ADDRESS	112 QUAILWOOD DR		STREET ADDRESS	3203 Otter (
CITY-ST-ZIP	WINTER HAVEN FL 33880-1022		CITY-ST-ZIP	Lakeland FL	33810			
TITLE	TD	X Delete	TITLE	Тирод		☐ Change	Addition	
NAME	MOOKER, WILBUR		NAME	Treas. David Zdanow	vicz	-		
STREET ADDRESS	5745 POINCIANA AVE		STREET ADDRESS	535 Patterso	on St. W			
CITY-ST-ZIP	LAKELAND FL 33809-3354		CITY-ST-ZIP	Lakeland, FI	3380/13			
TITLE	D	□ x Delete	TITLE	VP	•	Change	Addition	
NAME	READ, BOB		NAME	Roger James 925 Clearvie	ω Δτια			
STREET ADDRESS	1123 PALACE PLACE		STREET ADDRESS	Lakeland, FI	33801			
CITY-ST-ZIP	LAKELAND FL 33813		CITY-ST-ZIP					
TITLE	V DOOTS	₹ Delete	TITLE	Editor		Change	Additio	
NAME	JAMES, ROGER		NAME	Dallas Clay				
ATDEEX	AAE ALEADUIEM ALIE							
STREET ADDRESS CITY-ST-ZIP	925 CLEARVIEW AVE LAKELAND FL 33801		STREET ADDRESS CITY-ST-ZIP	1 TT QUALTWO	od DR a . FL 33880-402			

Thereby certify that the information supplied with this liling does not qualify for the exemption stated in Section 119.07(3)(1). 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.

SIGNATURE: ___ David Zdanowicz VId Zdanowicz Jan Janna SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

863-688-4921