

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 04, 2002 8:00 am**  
**Secretary of State**

03-04-2002 90040 033 \*\*\*\*61.25

**DOCUMENT # N93000000727**

1. Entity Name

**POLK COMPUTER USERS' GROUP, INC.**

Principal Place of Business

Mailing Address

PO BOX 90404  
 LAKE LAND FL 33804-0404  
 US

PO BOX 90404  
 LAKE LAND FL 33804-0404  
 US

506117



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3170958

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZDANOWICZ, DAVID  
 535 PATTERSON ST. W.  
 LAKE LAND FL 33803

GORDON KINSEY  
 2844 FOREST BROOK DR. E.  
 LAKE LAND, FL 33811

Name

GORDON KINSEY

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

2844 FOREST BROOK DR. E.

City

LAKE LAND

FL

Zip Code

33811

8. 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.

GORDON KINSEY

2844 FOREST BROOK DR. E.

SIGNATURE LAKE LAND, FL 33811

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

*Gordon Kinsey*

2-18-02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

\$5.00 May Be  
 Added to Fees

Make Check Payable to  
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
 NAME SCHNEIDER, BOBBY J  
 STREET ADDRESS 4837 RON CIRCLE  
 CITY-ST-ZIP LAKE LAND FL 33805 ☒ Delete

TITLE PD  
 NAME JANE READ  
 STREET ADDRESS 1123 PALACE PLACE  
 CITY-ST-ZIP LAKE LAND, FL 33813 ☐ Change ☒ Addition

TITLE VP  
 NAME READ, ROB  
 STREET ADDRESS 1123 PALACE PLACE  
 CITY-ST-ZIP LAKE LAND FL 33813 ☒ Delete

TITLE VP-2nd  
 NAME MARVIN WYMAN  
 STREET ADDRESS 1625 ARIANA ST. #9  
 CITY-ST-ZIP LAKE LAND, FL 33803 ☐ Change ☒ Addition

TITLE SD  
 NAME KRAFT, HELEN  
 STREET ADDRESS 3203 OTTER CREEK CT.  
 CITY-ST-ZIP LAKE LAND FL 33810 ☒ Delete

TITLE SD  
 NAME ROSE SPUELOCK  
 STREET ADDRESS 157 IMPERIAL SOUTH GATE  
 CITY-ST-ZIP LAKE LAND, FL 33803 ☐ Change ☒ Addition

TITLE TD  
 NAME ZDANOWICZ, DAVID  
 STREET ADDRESS 535 PATTERSON ST. W.  
 CITY-ST-ZIP LAKE LAND FL 33803 ☒ Delete

TITLE TD  
 NAME GORDON KINSEY  
 STREET ADDRESS 2844 FOREST BROOK DR. E.  
 CITY-ST-ZIP LAKE LAND, FL 33811 ☐ Change ☒ Addition

TITLE VP  
 NAME JAMES, ROGER  
 STREET ADDRESS 925 CLEARVIEW AVE.  
 CITY-ST-ZIP LAKE LAND FL 33801 ☐ Delete

TITLE VP 1ST  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☒ Change ☐ Addition

TITLE E  
 NAME CLAY, DALLAS  
 STREET ADDRESS 112 QUAILWOOD DR.  
 CITY-ST-ZIP WINTER HAVEN FL 33880 ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

12. I 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 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:

GORDON KINSEY TREAS  
 SIGNATURE REQUIRED  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-18-02

863-6463696

Date

Daytime Phone #

CR2E037 (9/01)