

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 23, 1999 8:00 am
Secretary of State

06-23-1999 90001 026 ****61.25

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DOCUMENT # N95000005655

1. Corporation Name
BUSINESS REFERRAL NETWORK, INC.

Principal Place of Business
1737 W. OAKRIDGE ROAD
ORLANDO FL 32809

Mailing Address
1737 W. OAKRIDGE ROAD
ORLANDO FL 32809



| | | | | | |
|--------------------------------|--|---------------------|--|---|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified | |
| 21 | | 26 | | 11/30/1995 | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 4. FEI Number | |
| 22 | | 27 | | 59-3386910 | |
| City & State | | City & State | | 5. Certificate of Status Desired | |
| 23 | | 28 | | <input type="checkbox"/> \$8.75 Additional Fee Required | |
| Zip | | Zip | | 6. Election Campaign Financing | |
| 24 | | 29 | | <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| Country | | Country | | Trust Fund Contribution | |
| 25 | | 30 | | | |

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

| | | | |
|----|--|-----------------|----|
| 81 | Name | JOHN STEMBELGER | |
| 82 | Street Address (P.O. Box Number is Not Acceptable) | 5705 HANSEL AVE | |
| 83 | | | |
| 84 | City | ORLANDO | FL |
| 85 | Zip Code | 32809 | |

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 _____ DATE 6/10/99
(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-------------------------------|---|-----------------------|
| TITLE | PD | 1.1 TITLE | D |
| NAME | RANDY A BLACKWOOD | 1.2 NAME | |
| STREET ADDRESS | 3206 S CONWAY RD | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | ORLANDO FL 32812 | 1.4 CITY-ST-ZIP | |
| TITLE | D | 2.1 TITLE | |
| NAME | DUNLAP, SAMUEL O | 2.2 NAME | |
| STREET ADDRESS | 1737 WEST OAK RIDGE ROAD | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | ORLANDO FL | 2.4 CITY-ST-ZIP | |
| TITLE | D | 3.1 TITLE | |
| NAME | RAYNES, WILLIAM H. | 3.2 NAME | |
| STREET ADDRESS | 6000 S. RIO GRANDE, SUITE 103 | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | ORLANDO FL | 3.4 CITY-ST-ZIP | |
| TITLE | TD | 4.1 TITLE | |
| NAME | BOWMAN, MARY B. | 4.2 NAME | |
| STREET ADDRESS | 7039 DELTA DRIVE, SUITE 54 | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | ORLANDO FL | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | P |
| NAME | | 5.2 NAME | DAVID FOOTE |
| STREET ADDRESS | | 5.3 STREET ADDRESS | 1700 NORTH ORANGE AVE |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | ORLANDO FL 32809 |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
SAM DUNLAP
Date 5/25/99
Daytime Phone # 407 851 3075

CR2E037 (1/98)