

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90220 007 ****61.25

DOCUMENT # N 96 000 00 4824

1. Entity Name

BUSINESS NETWORK INC.

648786

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

196 E. NINE MILE RD

3. Mailing Address

SAME

Suite, Apt. #, etc.

E

Suite, Apt. #, etc.

City & State

PENSACOLA FL

City & State

4. FEI Number

72-2666183

Applied For

Not Applicable

Zip

32534

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MICHAEL FERRARO

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

196 E. NINE MILE RD

City

PENSACOLA

FL

Zip Code

32534

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Michael Ferraro

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

(NOTE: Registered Agent signature required when reinstating)

4/25/02

DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

*OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MICHAEL FERRARO
196 E. NINE MILE RD
PENSACOLA FL 32534

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PAT MURPHY
1640 IRIS TERRACE
PENSACOLA FL 32533

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
STUART BAINBR
121 S. PALM
PENSACOLA FL 32501

TITLE
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CITY- ST- ZIP

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IN THIS SPACE**

CR2E037B (12/01)

Michael Ferraro

MICHAEL FERRARO 4/25/02 (810) 475-4400

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004824

1. Entity Name

BUSINESS NETLINK, INC.

Principal Place of Business

7232 PLANTATION RD
SUITE 102
PENSACOLA FL 32504
US

Mailing Address

7282 PLANTATION RD
SUITE 102
PENSACOLA FL 32504
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

75-2666183

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HEFLICH, MICHAEL
7282 PLANTATION RD SUITE 102
PENSACOLA FL 32504

7. Name and Address of New Registered Agent

Name

MICHAEL FERRARO

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

25 E. NINE MILE RD

PENSACOLA FL

City

FL

Zip Code

32534

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.

SIGNATURE *Michael Ferraro* MICHAEL FERRARO

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

(NOTE: Registered Agent signature required when reinstating)

9/19/01

DATE

FILE NOW
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME HARRIS, ASHLEY
STREET ADDRESS 316 S BAYLES ST SUITE 100
CITY-ST-ZIP PENSACOLA FL 32501

TITLE D ☐ Delete
NAME BANTER, STUART
STREET ADDRESS 121 S. PALAFOX
CITY-ST-ZIP PENSACOLA FL 32501

TITLE D ☒ Delete
NAME HOEFELICH, MICHAEL
STREET ADDRESS 7282 PLANTATION RD., STE 102
CITY-ST-ZIP PENSACOLA F 32504

TITLE D ☐ Delete
NAME MURPHY, PAT
STREET ADDRESS 1640 IRIS TERRACE
CITY-ST-ZIP PENSACOLA FL 32533

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE MICHAEL FERRARO ☐ Change ☒ Addition
NAME
STREET ADDRESS 25 E. NINE MILE RD
CITY-ST-ZIP PENSACOLA FL 32534

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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

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: *Michael Ferraro* MICHAEL FERRARO 9/19/01

ATTACHMENT
Ch# 1014
9/19/01



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THIS IS
A COPY
OF UBR
4500

CR2E037 (10/00)