2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2001 8:00 am
Secretary of State
03-27-2001 90062 010 ****61.25

DOCUMENT # N97000000244

1. Entity Name

LIBRARY AND INFORMATION RESOURCES NETWORK, INC.

Principal Place of Business	Mailing Address
7855 126TH AVE NORTH STE F LARGO FL 33773 US	7855 126TH AVE NORTH STE F LARGO FL 33733 US

DO NOT WRITE IN THIS SPACE

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 65-0767267 ☐ Applied For ☐ Not Applicable

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
JONES, DONALD C 1685 MEDICAL LANE FORT MYERS FL 33907-1157	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	V ALPHONSO, JORGE 6840 S.W. 40 STREET MIAMI FL 33155	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Devaux, Douglas F. 3693 Imperial Ridge Pkwy. Palm Harbor, FL 34684 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GAYLE, JANET 600 TAYLOR STREET JOLIET IL 60435	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jennings, Tuny 39 Le Tourneau Circle Hurlburt Field, FL 32544 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DUGAN, PATRICK K 419 BELLE PT. DRIVE ST PETE BEACH FL 33706	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Faulkner, Mary 17250-8 Eagle Trace Ft. Myers, FL 33908 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HASTREITER, JAMIE 4200 54TH AVENUE SOUTH ST PETERSBURG FL 33711	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Butler, Henry 2900 N. W. 31st Terrace Gainesville, FL 32605 ☒ Change ☐ Addition Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KOON, WILEY 3319 WEST HILLSBOROUGH AVENUE TAMPA FL 33614	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Koon Wiley 995 E. Memorial Blvd. Lakeland, FL 33801 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TIPSWORD, TOM 600 S CLYDE MORRIS BLVD DAYTONA BEACH FL 32114	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

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: Douglas F. Devaux Douglas F. Devaux March 20, 2001 (727) 536-0214
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #