2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 8:00 am
Secretary of State
01-12-2004 90004 031 ****61.25

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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

01062004 Chg-NP CR2E037 (10/03)

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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT DEVAUX, DOUGLAS F 3693 IMPERIAL RIDGE PKWY PALM HARBOR, FL 34684	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TUNY JENNINGS 326 GREEN ACRES ROAD FORT WALTON BEACH, FL 32547	☐ 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	DS MARY FAULKNER 8099 College Parkway, SW Ft. Myers, FL 33919	☐ 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	D REBECCA TABAKIN 5555 Greenwich Road Virginia Beach, VA 23462	☐ 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 Gill, JAMIE 4200 54TH AVENUE SOUTH ST. PETERSBURG, FL 33711	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD KOON, WILEY 101 WEST MAIN ST. LEESBURG, FL 34748	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD KOON, WILEY 1502 ELGIN STREET 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

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 Devaux, Treasurer — January 9, 2004 — 727-530-3126
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #