

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002986

1. Entity Name

GREATER TAMPA BAY PC USER GROUP, INC.

Principal Place of Business

10414 COLUMBUS DRIVE  
BLDG. 605. ROOM BTEC 103  
TAMPA FL

Mailing Address

P.O. BOX 501  
BRANDON FL 33509-0501

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

59-3654227

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

STUART, PEGGY L  
1523 SUNNYHILLS DRIVE  
BRANDON FL 33510-2648

Name PHIL COLDWELL

Street Address (P.O. Box Number is Not Acceptable)  
1605 SOUTHEREST CT.

City BRANDON

FL

Zip Code 33510

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

*Phil Coldwell* TREASURER 4-21-01

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 D  
NAME MONROE, PARKER  
STREET ADDRESS 1625 STORINGTON AVE  
CITY-ST-ZIP BRANDON FL 33511 ☐ Delete

TITLE ~~PHIL~~ P  
NAME BRIAN SOCHAR ☒ Change ☐ Addition  
STREET ADDRESS 2108 LITHIA PINELAKE  
CITY-ST-ZIP VALERIO, FL 33511

TITLE P  
NAME VANDERFORD, CHARLIE  
STREET ADDRESS 11406 ROBLES DEL RIO PLACE  
CITY-ST-ZIP TAMPA FL 33617 ☐ Delete

TITLE D  
NAME VANDERFORD, CHARLES ☒ Change ☐ Addition  
STREET ADDRESS 11406 ROBLES DEL RIO PLACE  
CITY-ST-ZIP TAMPA, FL 33617

TITLE VP  
NAME BRUCE, JOHN  
STREET ADDRESS 13650 GLEN HARWELL RD  
CITY-ST-ZIP DOVER FL 33527 ☐ Delete

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

TITLE ST  
NAME COLDWELL, PHIL  
STREET ADDRESS 1605 SOUTHEREST CT  
CITY-ST-ZIP BRANDON FL 33510 ☐ Delete

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

TITLE D  
NAME STUART, PEGGY  
STREET ADDRESS 1523 SUNNYHILLS DRIVE  
CITY-ST-ZIP BRANDON FL 33510 ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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:

*Phil Coldwell* PHIL COLDWELL

4-21-01

813-654-6736

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)