2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 12, 2002
Secretary of State

DOCUMENT# P00000056536

Entity Name: BRUSPORTS, INC.

Current Principal Place of Business:

27524 RIVERBANK DR
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

27524 RIVERBANK DR
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 31-1165615 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRUCE, EARLE D
27524 RIVERBANK DR
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BRUCE, EARLE D
Address: 27524 RIVERBANK DR
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP ( ) Delete
Name: BRUCE, JEAN A
Address: 27524 RIVERBANK DR
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S ( ) Delete
Name: BRUCE, MICHAEL
Address: 4325 JENNYDAWN PLACE
City-St-Zip: COLUMBUS, OH 43026

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: BRUCE, MICHELE D
Address: 4325 JENNYDAWN PLACE
City-St-Zip: COLUMBUS, OH 43026

Title: DIR. ( ) Change (X) Addition
Name: BELL, AIMEE S
Address: 3327 HIGHLAND FORGE TRAIL
City-St-Zip: DACULA, GA 30019

Title: DIR. ( ) Change (X) Addition
Name: SMITH, LYNN A
Address: 6406 NEWGRANGE DRIVE
City-St-Zip: DUBLIN, OH 43016

Title: T ( ) Change (X) Addition
Name: BRUCE, NOEL S
Address: 17315 MADISON AVE. APT. 10
City-St-Zip: LAKEWOOD, OH 44107

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NOEL S. BRUCE DIR. 08/12/2002

Electronic Signature of Signing Officer or Director Date