

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2001 8:00 am
Secretary of State

05-05-2001 90369 025 ***150.00

DOCUMENT # P00000090514

1. Entity Name
THE COMPUTER SHOP, INC.

Principal Place of Business: **1012 E SILVER SPRINGS BLVD STE D Ocala FL 34470**
 Mailing Address: **1012 E SILVER SPRINGS BLVD STE D Ocala FL 34470**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **3775 SOUTH PINE AVE**
 3. Mailing Address: **3154 SW 167th Ave**

Suite, Apt. #, etc.:
 City & State: **OCALA FL**

4. FEI Number: **29-3272281**
 Applied For: Not Applicable

Zip: **34470** Country: **USA**

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
SMITH-PARKER, JONATHAN
1012 E SILVER SPRINGS BLVD STE D
OCALA FL 34470

7. Name and Address of New Registered Agent
 Name: **SMITH-PARKER, JONATHAN**
 Street Address (P.O. Box Number Not Acceptable): **3775 SOUTH PINE AVE**
 City: **OCALA** FL Zip Code: **34470**

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]* **JONATHAN SMITH-PARKER** DATE: **4/27/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent; signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: D <input type="checkbox"/> Delete NAME: SMITH-PARKER, JONATHAN STREET ADDRESS: 1012 E SILVER SPRINGS BLVD STE D CITY-ST-ZIP: OCALA FL 34470		TITLE: D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME: SMITH-PARKER, JONATHAN STREET ADDRESS: 3775 SOUTH PINE AVE CITY-ST-ZIP: OCALA, FL 34470	
TITLE: D <input type="checkbox"/> Delete NAME: SMITH-PARKER, TERESA STREET ADDRESS: 1012 E SILVER SPRINGS BLVD STE D CITY-ST-ZIP: OCALA FL 34470		TITLE: D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME: SMITH-PARKER, TERESA STREET ADDRESS: 3775 SOUTH PINE AVE CITY-ST-ZIP: OCALA FL 34470	
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13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE: **4/27/01** DAYTIME PHONE #: **(352) 627-3005**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)