# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Apr 09, 2002 8:00 AM**
**Secretary of State**

DOCUMENT# P01000004095

**Entity Name:** CORNERSTONE MANAGEMENT SOLUTIONS, INC.

**Current Principal Place of Business:**

22528 MAGNOLIA TRACE BLVD.
LUTZ, FL 33549

**New Principal Place of Business:**

**Current Mailing Address:**

22528 MAGNOLIA TRACE BLVD.
LUTZ, FL 33549

**New Mailing Address:**

**FEI Number: 59-3713949** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AUCOIN, LAWRENCE T
22528 MAGNOLIA TRACE BLVD.
LUTZ, FL 33549 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: BREWER, BRYAN R
Address: 4306 WATERFORD WAY
City-St-Zip: LIMERICK, PA 19468

Title: V ( ) Delete
Name: AUCOIN, LAWRENCE T
Address: 22528 MAGNOLIA TRACE BLVD.
City-St-Zip: LUTZ, FL 33549

Title: ST ( ) Delete
Name: LAGARELLA, MARK EDWARD
Address: 869 N. READ AVE.
City-St-Zip: RUNNEMEDE, NJ 08078

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: BREWER, BRYAN R
Address: 4017 MARLOW LOOP
City-St-Zip: LAND O'LAKES, FL 34639

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

Title: ST (X) Change ( ) Addition
Name: AUCOIN, LILLIE
Address: 11994 OLD HAMMOND HWY
City-St-Zip: BATON ROUGE, LA 70816

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: LAWRENCE T. AUCOIN V 04/09/2002

Electronic Signature of Signing Officer or Director — Date