

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90983 026 ***150.00

DOCUMENT # P01000006625

1. Entity Name
BUSINESS ROUNDTABLE, INC.



Principal Place of Business
**2228 NORTHEAST 40TH TERRACE STE C
GAINESVILLE FL 32605**

Mailing Address
**2228 NORTHEAST 40TH TERRACE STE C
GAINESVILLE FL 32605**

2. Principal Place of Business
2131 NW 40th TERRACE

3. Mailing Address
2131 NW 40th TERRACE

Suite, Apt. #, etc.
STE D

Suite, Apt. #, etc.
STE D

City & State
GAINESVILLE, FL

City & State
GAINESVILLE, FL

Zip
32605

Country
USA

Zip
32605

Country
USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
59-3693856

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

**KRUEGER, SCOTT D
2790 NW 43RD STREET STE 200
GAINESVILLE FL 32605**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/10/03

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DISTEFANO, JOHN E 2228 NORTHEAST 40TH TERRACE STE C GAINESVILLE FL 32605	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARGARITA, MELISSA A 2228 NORTHEAST 40TH TERRACE STE C GAINESVILLE FL 32605	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KREUTCHIC, JERRY 2228 NORTHEAST 40TH TERRACE STE C GAINESVILLE FL 32605	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an affidavit, with all other like empowered.

SIGNATURE:

NOTAR PUBLIC REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/03 (352)375-5877

Date Daytime Phone #

CR2E034 (10/02)