## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P02000038199

Entity Name: NET-PRO PROFESSIONAL NETWORK SOLUTIONS, INC.

FILED Mar 24, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

BRYAN, DERREN

3562 HIMROD RD.

BRYAN, DIANE

VSD

BOWLING GREEN, FL 33834

(X) Change ( ) Addition

(X) Change ( ) Addition

**Current Principal Place of Business: New Principal Place of Business:** 

5898 S W SHORES AVENUE 3562 HIMROD RD.

ARCACIA, FL 34266 BOWLING GREEN, FL 33834

**Current Mailing Address: New Mailing Address:** 

5898 S W SHORES AVENUE 3562 HIMROD RD

BOWLING GREEN, FL 33834 ARCACIA, FL 34266

**FEI Number:** FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

BRYAN, DERREN BRYAN, DERREN 5898 S W SHORES AVENUE 3562 HIMROD RD.

ARCACIA, FL 34266 BOWLING GREEN, FL 33834

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: 03/24/2003

> Electronic Signature of Registered Agent Date

> > Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

Title: () Delete

BRYAN, DERREN Name: 5898 S W SHORES AVENUE Address:

City-St-Zip: ARCACIA, FL 34266

( ) Delete Title: VSD

Name: BRYAN, DIANE

5898 S W SHORES AVENUE Address:

Address: 3562 HIMROD RD. ARCACIA, FL 34266 BOWING GREEN, FL 33834 City-St-Zip: City-St-Zip:

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 Statutés. 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: DIANE BRYAN **VSD** 03/24/2003

Electronic Signature of Signing Officer or Director

Date