

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000007858

1. Entity Name

BUSINESS TO BUSINESS NEWSPAPERS, INC.

FILED
Sep 13, 2000 8:00 am
Secretary of State

09-13-2000 90053 024 ***550.00

Principal Place of Business

1260 E OAKLAND PARK BLVD
 FT LAUDERDALE FL 33334
 US

Mailing Address

1260 E OAKLAND PARK BLVD
 FT LAUDERDALE FL 33334
 US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0740957**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

FUHRMEISTER, J. CHRISTPHER
 1260 E OAKLAND PARK BLVD
 FT LAUDERDALE FL 33334

7. Name and Address of New Registered Agent

Name **JUDITH JARVIS, P-A.**
 Street Address (P.O. Box Number is Not Acceptable)
2701 W. OAKLAND PARK BLVD
Ste 230
 City **FT. LAUDERDALE** **FL** Zip Code **33311**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE	P	<input type="checkbox"/> Delete
NAME	MARK, JON J	
STREET ADDRESS	780 SW 70TH AVE.	
CITY-ST-ZIP	PLANTATION FL 33317	
TITLE	VP	<input type="checkbox"/> Delete
NAME	HENNESSEE, ROBERT E	
STREET ADDRESS	6251 PALM TRACE LANDING DR., #119	
CITY-ST-ZIP	DAVIE FL 33314	
TITLE	S	<input type="checkbox"/> Delete
NAME	GALLANT, GLENN M	
STREET ADDRESS	5596 BAYVIEW DRIVE	
CITY-ST-ZIP	FT LAUDERDALE FL 33308	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	FUHRMEISTER, CHRISTOPHER	
STREET ADDRESS	1260 E OAKLAND PARK BLVD	
CITY-ST-ZIP	FT. LAUDERDALE FL 33334	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)