## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P98000028261

Entity Name: VIRTUAL BUSINESS NETWORK, INC.

Apr 30, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

418 SW 140TH TERRACE 7545 W. UNIVERSITY AVENUE NEWBERRY, FL 32669

GAINESVILLE, FL 32607

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

418 SW 140TH TERRACE 7545 W. UNIVERSITY AVENUE NEWBERRY, FL 32669

GAINESVILLE, FL 32607

FEI Number: 59-3541177 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LANE, THOMAS H JR LANE, THOMAS H JR 418 SW 140TH TERRACE 3601 SW 2ND AVENUE NEWBERRY, FL 32669 GAINESVILLE, FL 32607

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: 04/30/2003

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

Title: ( ) Delete Title: (X) Change ( ) Addition

SCHOTT, JOHN L SCHOTT, JOHN L Name: Name: 5200 NEWBERRY RD. -D9 3601 S.W. 2ND AVENUE, SUITE M Address: Address:

City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32607

( ) Delete **VPSD** Title: **VPSD** (X) Change ( ) Addition Title: Name: MCCOY, GERALD H JR. Name: MCCOY, GERALD H JR.

5200 NEWBERRY RD. -D9 7545 W. UNIVERSITY AVENUE, SUITE M Address: Address: GAINESVILLE, FL 32607 GAINESVILLE, FL 32607 City-St-Zip: City-St-Zip:

Title: (X) Change ( ) Addition Title: CEOD ( ) Delete CEOD LANE, THOMAS H JR Name: LANE, THOMAS H JR Name:

418 SW 140TH TERRACE 3601 S.W. 2ND AVENUE, SUITE M Address: Address:

City-St-Zip: NEWBERRY, FL 32669 City-St-Zip: GAINESVILLE, FL 32607

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.

VΡ SIGNATURE: GERALD H. MCCOY, JR. 04/30/2003