

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90201 049 ***150.00

DOCUMENT # P98000078002

1. Corporation Name

BUILDING SCIENCES NETWORK, INC.

Principal Place of Business

30338 DEER RUN
DADE CITY FL 33523

Mailing Address

30338 DEER RUN
DADE CITY FL 33523

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/09/1998

4. FEI Number

59-3538043

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 30338 DEER RUN

2a. Mailing Address

26 30338 DEER RUN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 ~~DADE CITY FL~~

27

City & State

City & State

23 3352 Dade City, FL

28 DADE CITY, FL

Zip

Country

24 33523

25 PASCO

Zip

Country

29 33523

30 PASCO

9. Name and Address of Current Registered Agent

ALLEN, C. RICHARD
30338 DEER RUN
DADE CITY FL 33523

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME ALLEN, C. RICHARD
STREET ADDRESS 30338 DEER RUN
CITY-ST-ZIP DADE CITY FL 33523

TITLE D ☐ DELETE

NAME ALLEN, KATHERINE
STREET ADDRESS 30338 DEER RUN
CITY-ST-ZIP DADE CITY FL 33523

TITLE D ☐ DELETE

NAME HUOSPETH, GARY
STREET ADDRESS 30338 DEER RUN
CITY-ST-ZIP DADE CITY FL 33523

TITLE D ☐ DELETE

NAME MANN, LESTER
STREET ADDRESS 30338 DEER RUN
CITY-ST-ZIP DADE CITY FL 33523

TITLE D ☐ DELETE

NAME ALLEN, EMILY
STREET ADDRESS 30338 DEER RUN
CITY-ST-ZIP DADE CITY FL 33523

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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 (1/98)

03/97/19