

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
 05-13-2002 90083 042 ***150.00

DOCUMENT # P98000078002

1. Entity 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**

2. Principal Place of Business

Same

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3538043

Applied For

Not Applicable

Zip

33523

Country

FL

Zip

33523

Country

FL

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

N/A

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.

SIGNATURE

[Signature]

4/22/02

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 \$150.00
 After May 1, 2002 Fee will be \$550.00
 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	D	<input type="checkbox"/> Delete
NAME	ALLEN, C. RICHARD	
STREET ADDRESS	30338 DEER RUN	
CITY-ST-ZIP	DADE CITY FL 33523	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALLEN, KATHERINE	
STREET ADDRESS	30338 DEER RUN	
CITY-ST-ZIP	DADE CITY FL 33523	
TITLE	D	<input type="checkbox"/> Delete
NAME	HUOSPETH, GARY	
STREET ADDRESS	30338 DEER RUN	
CITY-ST-ZIP	DADE CITY FL 33523	
TITLE	D	<input type="checkbox"/> Delete
NAME	MANN, LESTER	
STREET ADDRESS	30338 DEER RUN	
CITY-ST-ZIP	DADE CITY FL 33523	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALLEN, EMILY	
STREET ADDRESS	30338 DEER RUN	
CITY-ST-ZIP	DADE CITY FL 33523	
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]
 C. RICHARD ALLEN

4/22/02

352588-4562

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (9/01)