

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State
 04-11-2001 90026 040 ***150.00

0622572

DOCUMENT # S54472

1. Entity Name
FBS BUSINESS SYSTEMS CORPORATION

Principal Place of Business Mailing Address
5430 W. CRENSHAW **PO BOX 15365**
TAMPA FL 33634 **TAMPA FL 33684**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-3071291** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CHATTERTON, RICHARD M.
5430 W. CRENSHAW
TAMPA FL 33634

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
C	CHATTERTON, GLORIA N.	15402 N FLA AVE	TAMPA FL	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	<input type="checkbox"/>
P	CHATTERTON, RICHARD M.	15402 N FLA AVE	TAMPA FL 33613	<input type="checkbox"/>		CHAIRMAN - PRESIDENT			<input checked="" type="checkbox"/>	<input type="checkbox"/>
VP	KRUCK, MICHAEL L	4623 TAMNEY LANE	LAND O LAKES FL 34639	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
S	KRUCK, CHRISTINA	4623 TAMNEY LANE	LAND O LAKES FL 34639	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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: *Richard M. Chatterton*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.06.01

Date

813 884-0414

Daytime Phone #

CR2E034 (10/00)