

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 30, 2001 08:00 AM**
Secretary of State**DOCUMENT # H19948**1. Entity Name
GLOBENET SECURITIES, INC.

Principal Place of Business 507 N. NEW YORK AVE. STE 200 WINTER PARK 32789 US	FL	Mailing Address 507 N. NEW YORK AVE. STE 200 WINTER PARK 32789 US	FL
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2. Principal Place of Business	3. Mailing Address 220 E CENTRAL PKWY
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Suite, Apt. #, etc.	Suite, Apt. #, etc. SUITE 4010
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City & State	City & State ALTAMONTE SPRINGS FL
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Zip	Country	Zip	Country
32701	US	32701	US

4. FEI Number
59-2453894
Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**SEMONES BOB**
507 N NEW YORK AVENUE
SUITE 200
WINTER PARK
32789
US

FL

7. Name and Address of New Registered AgentName
WILLSEY ALAN G
Street Address (P.O. Box Number is Not Acceptable)
220 E CENTRAL PKWY
SUITE 4010
City
ALTAMONTE SPRINGS
FL
Zip Code
32701

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 **ALAN G. WILLSEY****04/30/2001**

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	ST	☐ Delete
NAME	ALLEN MONTY K	
STREET ADDRESS	507 N. NEW YORK AVE-STE 200	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	VD	☐ Delete
NAME	WILLSEY ALAN G	
STREET ADDRESS	507 N. NEW YORK AVE - STE 200	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	PD	☒ Delete
NAME	MAGILL LOUIS C	
STREET ADDRESS	507 N NEW YORK AVENUE - STE 200	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	ST	☒ Change ☐ Addition
NAME	ALLEN MONTY K	
STREET ADDRESS	220 E CENTRAL PKWY, SUITE 4010	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32701	
TITLE	PD	☒ Change ☐ Addition
NAME	WILLSEY ALAN G	
STREET ADDRESS	220 E CENTRAL PKWY, SUITE 4010	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32701	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ 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: ALAN G. WILLSEY

PD

04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)