2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P-98000076258

FILED

00 OCT -3 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name
INTERNATIONAL FINANCIAL & MANAGEMENT RESOURCE INC.

Principal Place of Business	Mailing Address
IFARM, INC	1501 UNIT-36 CC ARIANA RD LAKELAND, FL 32815

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1501 ARIANA RD.	426 PALMOLA RD.
Suite, Apt. #, etc.: UNIT 36-CC	Suite, Apt. #, etc.
City & State: LAKELAND, FLORIDA	City & State: LAKELAND, FLORIDA
Zip: 33815 Country: USA	Zip: 33803 Country: U.S.A.

4. FEI Number: 59-3557192 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MR DOUGLAS LYONS, ATTY 325 NO CALHOUN TALLAHASSEE, FL 32301	Name Street Address (P.O. Box Number is Not Acceptable)

900003455209--2
-11/07/00--01072--005
City ****150.00 FL ****150.00

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 _____ 10/2/00
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, 2000 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		
		☐ Delete		☐ Change	☑ Addition
TITLE	PRES. \ DIR		CORP. SEC. \ DIRECTOR		
NAME	RICHARD C. MURPHY, JR		JACQUELYN S. WILLIAMS		
STREET ADDRESS	426 PALMOLA RD		426 PALMOLA RD		
CITY-ST-ZIP	LAKELAND, FLA 33803		LAKELAND, FL 33803		
		☑ Delete		☐ Change	☑ Addition
TITLE	DIRECTOR		TRESURER		
NAME	RICHARD KELLY		BETTY R. WALTERS		
STREET ADDRESS	4449 MAYLOR ROAD		460 WINDERMERE DR		
CITY-ST-ZIP	TALLAHASSEE, FLA 32308		LAKELAND, FL 33809		
		☑ Delete		☐ Change	☑ Addition
TITLE	DIRECTOR		DIRECTOR		
NAME	WM. LANCE GERLIN		R. DALE MURPHY		
STREET ADDRESS	9828 WATERS MEET DR.		1009 MECHAM #3		
CITY-ST-ZIP	TALLAHASSEE, FLA. 32312		RUIDOSO, N.M. 88345		
		☐ Delete		☐ Change	☑ Addition
TITLE			DIRECTOR & CEO		
NAME			THOMAS BURKE		
STREET ADDRESS			11500 SUNRISE VALLEY DR #360		
CITY-ST-ZIP			RESTON, VA. 20191-1492		
		☐ Delete		☐ Change	☑ Addition
TITLE			DIRECTOR		
NAME			LOU DARDEN, NBR		
STREET ADDRESS			205-34 ST		
CITY-ST-ZIP			VIRGINIA BCH, VA. 23451		
		☐ Delete		☐ Change	☑ Addition
TITLE			DIRECTOR		
NAME			PETER J. MORAN		
STREET ADDRESS			804 SHADY OAK LN		
CITY-ST-ZIP			LEESBURG, VA. 20175		

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: Jacquelyn S. Williams, Sec. 9-1-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/99)

TO Sec. of State, Corp. Records
P.O. Box 6327
Tallahassee, Fla 32314

FROM

IFARM, INC.
www.ifrm@stsi.com
1501 Ariana St., Suite 36-cc
LAKELAND, FLORIDA 33815
OFFICE: (863) 646-2323/682-9569 FAX

202

SUBJECT: CORPORATE ANNUAL REPORT : FEES DATE: 8-27-2000

FOLD ⬆ TO WHOM IT MAY CONCERN

ALL STATE Documents and file forms, were never received or transferred, to correct forwarding address, for this company, to execute filing accordingly.

Having received the attached forms, by personal inquiry to Tallahassee 8-23-2000, we return same in appropriation and fee.

Thank for completing the proper entry on the attached documents and filing fee of $50.00

Respectfully
J. C. Murphy for Pres.

PLEASE REPLY TO ⟶ SIGNED

REPLY

DATE: SIGNED

Reorder Item #F274 Grayarc, P.O. Box 2944, Hartford, CT 06104-2944
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