

AMENDED
2000 UNIFORM BUSINESS REPORT (UBR)

61.25
8.75
70.00

DOCUMENT # P98000104383

1. Entity Name

Spectorsoft Corporation

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 OCT 16 PM 3:42

Principal Place of Business

Mailing Address

2801 Ocean Dr
Vero Beach FL 32963

2801 Ocean Dr
Vero Beach FL 32963

2. Principal Place of Business

333 17th Street

3. Mailing Address

333 17th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite L

Suite L

City & State

City & State

Vero Beach FL

Vero Beach FL

Zip

Country

Zip

Country

32960

USA

32960

4. FEI Number

59-3586778

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

7. Name and Address of New Registered Agent

Fred Kretschmer
Moss & Henderson
817 Beachland Blvd
Vero Beach FL 32963

Name

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

Moss & Henderson

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, 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

TITLE Secretary Treasurer ☒ Delete
NAME Cheryl Quesnel
STREET ADDRESS 4830 50th Ave
CITY-ST-ZIP Vero Beach FL 32967

TITLE President ☒ Change ☐ Addition
NAME C. Douglas Fowler
STREET ADDRESS 968 Wimbledon Dr
CITY-ST-ZIP Melbourne FL 32940

TITLE Director ☒ Delete
NAME Cheryl Quesnel
STREET ADDRESS 4830 50th Ave
CITY-ST-ZIP Vero Beach FL 32967

TITLE Tim Adams - Director ☐ Change ☐ Addition
NAME
STREET ADDRESS 219 Countryhaven Rd
CITY-ST-ZIP Encinitas, CA 92024

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Director ☒ Change ☐ Addition
NAME Ron Chesley
STREET ADDRESS 4800 Hwy A1A
CITY-ST-ZIP Vero Beach FL 32963

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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:

C. Douglas Fowler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561-770-5670

CR2E034 (9/99)