

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000049955

1. Entity Name

~~CARLETON/TRITTON GROUP, INC.~~

*NFocus Visual Communications, Inc.*

Principal Place of Business

215 E. BAY ST.  
STE 6  
LAKELAND FL 33801  
US

Mailing Address

PO BOX 92536  
LAKELAND FL 33804-2536  
US

2. Principal Place of Business

*321 N. Kentucky Ave.*

Suite, Apt. #, etc.

*Suite 9*

3. Mailing Address

Suite, Apt. #, etc.

City & State

*Lakeland, FL*

City & State

Zip

*33804*

Country

*US*

Zip

Country

4. FEI Number

**59-3251579**

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

TRITTON, ROBERT J JR  
8000 GLENRIDGE LOOP W  
LAKELAND FL 33809

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

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 **D** ☐ Delete  
NAME TRITTON, ROBERT J JR  
STREET ADDRESS 8000 GLENRIDGE LOOP W  
CITY-ST-ZIP LAKELAND FL 33809

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

TITLE **D** ☐ Delete  
NAME CARLETON, JAMES G III  
STREET ADDRESS 1059 HIDDEN DR  
CITY-ST-ZIP LAKELAND FL 33809

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  
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TITLE ☐ Delete  
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*4-24-00*

*863-688-4505*

CR2E034 (9/99)



DO NOT WRITE IN THIS SPACE

# State of Florida



Department of State

#P940000049955  
724260

I certify the attached is a true and correct copy of the Articles of Amendment, filed on December 13, 1999, to Articles of Incorporation for CARLETON/TRITTON GROUP, INC. which changed its name to NFOCUS VISUAL COMMUNICATIONS, INC., a Florida corporation, as shown by the records of this office.

The document number of this corporation is P94000049955.

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capitol, this the  
Fourteenth day of December, 1999



CR2EO22 (1-99)

*Katherine Harris*

Katherine Harris  
Secretary of State