

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90126 046 ****61.25

DOCUMENT # N01000006924

1. Entity Name
3D T.E. A. M. FOUNDATION, INC.



Principal Place of Business

**ONE SOUTH ORANGE AVE
SUITE 304
ORLANDO FL 32801**

Mailing Address

**ONE SOUTH ORANGE AVE
SUITE 304
ORLANDO FL 32801**

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 **31-1807746**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COMPLETE BUSINESS SOLUTIONS, INC.
1805 CANOVER ST., #2
PALM BAY FL 32909**

Name

complete business solutions, inc.

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

1805 CANOVER ST #2

City

Palm Bay

FL

Zip Code

32909

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-30-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SCOTT, DENNIS E JR 9832 LAUREL VALLEY DR WINDERMERE FL 34786 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOLLYFIELD, CHRIS 756 CORONA AVE PALM BAY FL 32907 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JACKSON, DARLENE 7319 BRIARLYN COURT ORLANDO FL 32818 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD THOMAS, VAUGHN 9832 LAUREL VALLEY DR WINDERMERE FL 34786 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CYNTHIA HUNGER 2317 PATTYCKIRNE PALM BAY FL 32905 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD HOLLYFIELD CHRIS 756 CORONA AVE PALM BAY FL 32907 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OV HOLLYFIELD ANN 756 CORONA AVE PALM BAY FL 32907 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD WILLIAM KRIKE 1 SOUTH ORANGE AVE STE 304 ORLANDO FL 32801 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

April 30 2003 (407) 650-0081

CR2E037 (10/02)