

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 353998

1. Entity Name

OMNIVEST RESEARCH CORPORATION

FILED
Feb 28, 2000 8:00 am
Secretary of State

02-28-2000 90184 043 ***158.75

Principal Place of Business

Mailing Address

250 TAMPA AVE W
VENICE FL 34285

250 TAMPA AVE W
VENICE FL 34285-1729

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 59-1280601

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

Name

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

City

FL

Zip Code

CALWELL RONALD G JR
250 TAMPA AVE., W.
VENICE FL 34285

This should be
Roland

This should be Caldwell

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
NAME CALDWELL, ROLAND G.
STREET ADDRESS 4910 LEMON BAY DR
CITY-ST-ZIP VENICE FL

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE D
NAME MEYERHOFF, JACK
STREET ADDRESS 20 INLETS BLVD
CITY-ST-ZIP NOKOMIS FL

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE PSTD
NAME CALDWELL, ROLAND G., JR.
STREET ADDRESS 3320 HARDEE DR
CITY-ST-ZIP VENICE FL

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE VP
NAME ADAMS, WILLIAM
STREET ADDRESS 7339 HAWKINS ROAD
CITY-ST-ZIP SARASOTA FL 34241

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roland G. Caldwell, Jr. Pres.

Date

Daytime Phone #

02/08/00 941-493-4295

CR2E034 (9/99)