

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 393223

1. Entity Name

SIMTEC, INC.

Principal Place of Business

3600 STATE ROAD #520
P.O. BOX 3883
COCOA FL 32924-0883

Mailing Address

3600 STATE ROAD #520
P.O. BOX 3883
COCOA FL 32924-0883

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 59-1380106

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

WRIGHT, SCOTT
175 E NASA BLVD
SUITE 300
MELBOURNE FL 32921

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, 2001 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 DST ☐ Delete
NAME FISCHER, NANCY S.
STREET ADDRESS 14668 US HWY 31
CITY-ST-ZIP HOPE HULL AL 36043

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

TITLE VD ☐ Delete
NAME SIMICICH, JO ANNE
STREET ADDRESS 100 VANNOY ST
CITY-ST-ZIP GREENVILLE SC

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

TITLE CD ☐ Delete
NAME SIMICICH, ESPERANTO J
STREET ADDRESS 4873 S FRIDAY CIRCLE
CITY-ST-ZIP COCOA FL

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

TITLE D ☐ Delete
NAME PORTER, CARLA
STREET ADDRESS 12982 JAMES MONROE HWY.
CITY-ST-ZIP LEESBURG VA

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11561 Rolling Green Ct. #300
CITY-ST-ZIP Reston, VA 20191

TITLE PD ☐ Delete
NAME SIMICICH, STEVE
STREET ADDRESS 11901 SW 91ST AVE.
CITY-ST-ZIP MIAMI FL

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

TITLE SD ☐ Delete
NAME SMITH, GERALDINE S.
STREET ADDRESS 1210 PINECREST DR.
CITY-ST-ZIP ALPHARETTA GA

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 7950 Wynfield Drive
CITY-ST-ZIP Cumming, GA 30040-5688

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:

Nancy S. Fischer

Nancy S. Fischer

4/11/01

334/288-1995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90016 011 ***150.00



DO NOT WRITE IN THIS SPACE