

2000 UNIFORM BUSINESS REPORT (UBR)

4

DOCUMENT # 735123

1. Entity Name

THRESHOLD, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

04-03-2000 90148 001 ****61.25

Principal Place of Business 3550 NORTH GOLDENROD ROAD PO BOX 1110 GOLDENROD FL 32733	Mailing Address 3550 NORTH GOLDENROD ROAD PO BOX 1110 GOLDENROD FL 32733-1110
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1674609		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WILLARD, TEENA B 4000 N CHICKASAW TRAIL ORLANDO FL 32817		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CLAYBOURNE, KAY 15 N. SOLANDRA ORLANDO FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D M.J. Parker 3275 Progress Dr. Suite 2A Orlando, FL. 32826 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILLARD, TEENA B 4000 N. CHICKASAW TRAIL ORLANDO FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Richard Haury, Jr. 1600 Atlanta Financial Center 3343 Peachtree Rd. Atlanta, Ga. 30326 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD EICHLER-MORGAN, JUDY 7514 SAVANNAH GRAND AVE WINTER PARK FL 32792 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Judy Dennis 1939 Bent Oak Dr. Apopka, FL. 32712 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLARD, MD, SARAH 31 W COLUMBIA ST STE 2 ORLANDO FL 32806 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Warren Pearce 301 White Oak Circle Maitland, FL. 32751 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAURY, DICK 1818 ESPANOLA DR ORLANDO FL 32804 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TERRY, MARK 100 S ORANGE AVE STE 1000 ORLANDO FL 32801 ☐ Delete	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: Judy Dennis 3-22-2000 407-671-7060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #