

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 03, 2002 8:00 am
Secretary of State

09-03-2002 90170 032 ***550.00

DOCUMENT # 854276

1. Entity Name
FORSEON CORPORATION

Principal Place of Business

**6600 JURUPA AVENUE
RIVERSIDE CA 92504-1041**

Mailing Address

**3950 JOHN'S CREEK COURT
SUITE 100
SUWANEE GA 30024**

2. Principal Place of Business

**9020 Overlook Blvd
Suite, Apt. #, etc.
300**

3. Mailing Address

**P.O. Box 1603
Suite, Apt. #, etc.**



DO NOT WRITE IN THIS SPACE

City & State
Brentwood TN

City & State
Brentwood TN

4. FEI Number **95-3623992**

Applied For
Not Applicable

Zip
37027

Country
USA

Zip
37024

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
**1201 Hays St
City Tallahassee FL Zip Code 32301**

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 **Previously filed**

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **BAROCO, HENRY**
STREET ADDRESS **3950 JOHNS CREEK CT., STE. 100**
CITY-ST-ZIP **SUWANEE GA 30024**

TITLE **D, P** ☐ Change ☐ Addition
NAME **Thomas L. Black**
STREET ADDRESS **9020 Overlook Blvd., Ste 300**
CITY-ST-ZIP **Brentwood, TN 37027**

TITLE **TV** ☒ Delete
NAME **MERRILL, ALLEN E.**
STREET ADDRESS **6600 JURUPA AVE.**
CITY-ST-ZIP **RIVERSIDE CA 92504**

TITLE **D, V, S** ☐ Change ☐ Addition
NAME **Gerard M. Hayden**
STREET ADDRESS **9020 Overlook Blvd**
CITY-ST-ZIP **Brentwood, TN 37027**

TITLE **S** ☒ Delete
NAME **VOSLER, RANDY**
STREET ADDRESS **3950 JOHNS CREEK CT, STE. 100**
CITY-ST-ZIP **SUWANEE GA 33024**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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NAME
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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/26/02
Date

615/565-7516
Daytime Phone #

CR2E034 (4/02)