

2006 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

DOCUMENT # F02000002334

1. Entity Name
IDENTICATOR, INC.



06 MAR -2 PM 2:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

File

Principal Place of Business
13386 INTERNATIONAL PARKWAY
JACKSONVILLE, FL 32218

Mailing Address
13386 INTERNATIONAL PARKWAY
JACKSONVILLE, FL 32218

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02212006

Chg-P

CR2E034 (11/05)

4. FEI Number
59-3756251

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

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. 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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME 'BRIEN, SCOTT
STREET ADDRESS 13386 INTERNATIONAL PARKWAY
CITY-ST-ZIP JACKSONVILLE, FL 32218 ☐ Delete

TITLE VT
NAME WILLIAMS, MARK
STREET ADDRESS 13386 INTERNATIONAL PARKWAY
CITY-ST-ZIP JACKSONVILLE, FL 32218 ☐ Delete

TITLE V
NAME SEIDEL, JAMES
STREET ADDRESS 13386 INTERNATIONAL PARKWAY
CITY-ST-ZIP JACKSONVILLE, FL 32218 ☐ Delete

TITLE VD
NAME SCHILLER, ROBERT R
STREET ADDRESS 13386 INTERNATIONAL PARKWAY
CITY-ST-ZIP JACKSONVILLE, FL 32218 ☐ Delete

TITLE VAS
NAME BARATELLI, PHIL
STREET ADDRESS 13386 INTERNATIONAL PARKWAY
CITY-ST-ZIP JACKSONVILLE, FL 32218 ☐ Delete

TITLE S
NAME KATZ, GLENN
STREET ADDRESS 13386 INTERNATIONAL PARKWAY
CITY-ST-ZIP JACKSONVILLE, FL 32218 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME O'BRIEN, SCOTT
STREET ADDRESS 13386 INTERNATIONAL PARKWAY
CITY-ST-ZIP Jacksonville, FL 32218 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400067449464
03/09/06--01017--002 **850.00 ☐ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert R. Schiller

Vice President/Assistant Secretary 02/21/2006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #