

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 17, 2003 8:00 am**  
**Secretary of State**

03-17-2003 90095 049 \*\*\*150.00

**DOCUMENT # F24883**

**1. Entity Name**  
**CORNERSTONE SYSTEMS, INC.**



**Principal Place of Business**  
**250 EAGLE DRIVE**  
**JUPITER FL 33477**

**Mailing Address**  
**250 EAGLE DRIVE**  
**JUPITER FL 33477**



**2. Principal Place of Business**  
**11844 165 Rd. No., Jupiter, FL 33478**  
Suite, Apt. #, etc.

**3. Mailing Address**  
**11844 165 Rd. No., Jupiter, FL 33478**  
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

**City & State**

**City & State**

**4. FEI Number** **59-2086667**

**Applied For**  
**Not Applicable**

**Zip** **Country**

**Zip** **Country**

**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**

**ZETLER, JAMES**  
**250 EAGLES DRIVE**  
**JUPITER FL 33477**

**Name**  
**ZETLER JAMES**

**Street Address (P.O. Box Number is Not Acceptable)**  
**11844 165 Rd. No.**

**City**  
**Jupiter**

**FL**

**Zip Code**  
**33478**

**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** *James Zetler*  
Signature, typed or printed name of registered agent and title if applicable.

**James Zetler**

**03-06-03**

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**  
Trust Fund Contribution.

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **DP** ☐ Delete  
**NAME** **ZETLER, JAMES**  
**STREET ADDRESS** **250 EAGLE DRIVE**  
**CITY-ST-ZIP** **JUPITER FL**

**TITLE** ☒ Change ☐ Addition  
**NAME**  
**STREET ADDRESS** **11844 165 Rd. No.**  
**CITY-ST-ZIP** **Jupiter, FL 33478**

**TITLE** **V** ☐ Delete  
**NAME** **ZETLER, PATRICIA**  
**STREET ADDRESS** **250 EAGLE DRIVE**  
**CITY-ST-ZIP** **JUPITER FL**

**TITLE** ☒ Change ☐ Addition  
**NAME**  
**STREET ADDRESS** **11844 165 Rd. No.**  
**CITY-ST-ZIP** **Jupiter, FL 33478**

**TITLE** **DST** ☐ Delete  
**NAME** **ZETLER, PATRICIA**  
**STREET ADDRESS** **250 EAGLE DRIVE**  
**CITY-ST-ZIP** **JUPITER FL**

**TITLE** ☒ Change ☐ Addition  
**NAME**  
**STREET ADDRESS** **11844 165 Rd. No.**  
**CITY-ST-ZIP** **Jupiter, FL 33478**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
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**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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

**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 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:** *Patricia Zetler*  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**Patricia Zetler**

**3-6-2003**

**561-747-1813**

**Date**

**Daytime Phone #**

CR2E034 (10/02)