

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90159 005 ***150.00

DOCUMENT # F94000003631

1. Entity Name
SECURITY 4 IT, INC.

Principal Place of Business

**740 BAL HARBOR BLVD
PUNTA GORDA FL 33950
US**

Mailing Address

**P.O. BOX 510127
PUNTA GORDA FL 33950
US**



2. Principal Place of Business

2286-3 WEDNESDAY

3. Mailing Address

2286-3 WEDNESDAY ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TALLAHASSEE FL

City & State

TALLAHASSEE, FL.

4. FEI Number

59-2761005

Applied For

Not Applicable

Zip

32308

Country

USA

Zip

32308

Country

USA

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

FESSLER, JIM M

740 BAL HARBOR BLVD

PUNTA GORDA FL 33950

7. Name and Address of New Registered Agent

Name

JANET G FESSLER

Street Address (P.O. Box Number is Not Acceptable)

2325 HAVER HILL RD

City

TALLAHASSEE

FL

Zip Code

32312

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 *Janet G. Fessler*

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-26-02

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, 2002 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

TITLE **PTD** ☒ Delete
NAME **FESSLER, JIM M**
STREET ADDRESS **740 BAL HARBOR BLVD.**
CITY-ST-ZIP **PUNTA GORDA FL 33950**

TITLE **SD** ☒ Delete
NAME **FESSLER, JANET G**
STREET ADDRESS **740 BAL HARBOR BLVD.**
CITY-ST-ZIP **PUNTA GORDA FL 33950**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **M** ☒ Change ☐ Addition
NAME **JANET G. FESSLER**
STREET ADDRESS **2325 HAVER HILL RD**
CITY-ST-ZIP **TALLAHASSEE, FL 32312**

TITLE **D** ☒ Change ☐ Addition
NAME **FESSLER, JIM M**
STREET ADDRESS **2325 HAVER HILL RD**
CITY-ST-ZIP **TALLAHASSEE, FL 32312**

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

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

TITLE ☐ Change ☐ Addition
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: *Janet G. Fessler*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-02

Date

850-201-4767

Daytime Phone #

CR2E034 (9/01)