

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000003997

1. Entity Name

VINNET, INC.

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90056 040 ***150.00

Principal Place of Business

Mailing Address

900 BESTGATE ROAD. STE. 410
ANNAPOLIS MD 21401

900 BESTGATE ROAD. STE. 410
ANNAPOLIS MD 21401-7974

2. Principal Place of Business

900 Commerce Rd

3. Mailing Address

900 Commerce Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Annapolis MD

City & State
Annapolis MD

4. FEI Number 52-1868300

Applied For
Not Applicable

Zip 21401 Country USA

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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 ST.
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.

SIGNATURE

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 \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME SEYNHAEVE, DENIS
STREET ADDRESS 220 WARDOUR DR.
CITY-ST-ZIP ANNAAPOLIS MD

TITLE ☐ Change ☒ Addition
NAME George Rich
STREET ADDRESS 300 E. Lombard St, Suite 610
CITY-ST-ZIP BALTIMORE, MD, 21202

TITLE D ☒ Delete
NAME WARD, MARK
STREET ADDRESS 30 S WACKER DR FLOOR 37
CITY-ST-ZIP CHICAGO IL 60606

TITLE ☐ Change ☒ Addition
NAME MARC Gineris
STREET ADDRESS 696 Hillary Dr
CITY-ST-ZIP TIBURON, CA, 94920

TITLE D ☒ Delete
NAME SPENCER, GEORGE
STREET ADDRESS 205 N. MICHIGAN AVENUE, #808
CITY-ST-ZIP CHICAGO IL

TITLE ☐ Change ☒ Addition
NAME Beverly Devine
STREET ADDRESS 900 Commerce
CITY-ST-ZIP ANNAPOLIS MD 21401

TITLE PD ☒ Delete
NAME BAYNE, JOSEPH
STREET ADDRESS 900 BESTGATGE RD STE 410
CITY-ST-ZIP ANNAPOLIS MD 21402

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

TITLE D ☒ Delete
NAME FINZI, ROBERT
STREET ADDRESS 3000 SAND HILL ROAD, BLD. 3, SUITE 170
CITY-ST-ZIP MENIO PARK CA 94025

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

TITLE D ☒ Delete
NAME HICKEY, JANET
STREET ADDRESS 277 PARK AVE.
CITY-ST-ZIP NEW YORK NY 10172

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2F034 (9/99)