

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 14, 2001 8:00 am  
Secretary of State

05-14-2001 90048 043 \*\*\*150.00

DOCUMENT # F96000003538

1. Entity Name  
FUTURESOFT, INC.

Principal Place of Business

2047 DYRE HAVEN CT  
TALLAHASSEE FL 32311

Mailing Address

2047 DYRE HAVEN CT  
TALLAHASSEE FL 32311

2. Principal Place of Business

2312 MODN SHADOW RD  
Suite, Apt. #, etc.

3. Mailing Address

2312 MODN SHADOW RD  
Suite, Apt. #, etc.

City & State

NEWPORT RICHEY, FL  
Zip 34055 Country USA

City & State

NEWPORT RICHEY, FL  
Zip 34055 Country USA

4. FEI Number 59-3263229

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CULBERTSON, WALTER L JR  
7811 PINEVIEW DRIVE  
ODESSA FL 33556

7. Name and Address of New Registered Agent

Name WALTER L. CULBERTSON

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

2312 MODN SHADOW RD

City NEWPORT RICHEY FL Zip Code 34055

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, 2001 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 PC  
NAME CULBERTSON, WALTER L JR  
STREET ADDRESS 2047 DYRE HAVEN CT  
CITY-ST-ZIP TALLAHASSEE FL 32311 ☐ Delete

TITLE V  
NAME JEBSEN-CULBERTSON, DEBORAH R  
STREET ADDRESS 2047 DYRE HAVEN CT  
CITY-ST-ZIP TALLAHASSEE FL 32311 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT  
NAME WALTER L. CULBERTSON JR.  
STREET ADDRESS 2312 MODN SHADOW RD  
CITY-ST-ZIP NEWPORT RICHEY, FL 34055 ☒ Change ☐ Addition

TITLE SECRETARY & VP  
NAME DEBORAH R. CULBERTSON  
STREET ADDRESS 2312 MODN SHADOW RD  
CITY-ST-ZIP NEWPORT RICHEY, FL 34055 ☒ 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

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)