

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000000156

1. Entity Name

EVERETT CHARLES TECHNOLOGIES, INC.

FILED
May 23, 2000 8:00 am
Secretary of State

05-23-2000 90270 002 ***550.00

Principal Place of Business

Mailing Address

6860 EDGEWATER COMMERCE PARKWAY
SUITES 350 & 400
ORLANDO FL

700 E. HARRISON AVENUE
POMONA CA 91767-1920
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

94-3254863

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 32301-2525

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

Mark Miller, VP Finance

[Signature]

5/2/00

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 PD ☐ Delete
NAME VAN LOAN, DAVID R
STREET ADDRESS 2664 SHADY RIDGE
CITY-ST-ZIP DIAMOND BAR CA 91765

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

TITLE V ☒ Delete
NAME SUESSER, ALFRED
STREET ADDRESS 140 MEADBROOK ROAD
CITY-ST-ZIP GARDEN CITY NJ 11530

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

TITLE SD ☒ Delete
NAME LIVINGSTON, ROBERT-A
STREET ADDRESS 2613 PINE BLUFF DRIVE
CITY-ST-ZIP VESTAL NY 13850

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

TITLE C ☐ Delete
NAME POMEROY, JOHN E
STREET ADDRESS 416 MURRAY HILL ROAD
CITY-ST-ZIP VESTAL NY 13850

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

TITLE V ☐ Delete
NAME MILLER, MARK E
STREET ADDRESS 2193 NORTH FIRST AVENUE
CITY-ST-ZIP UPLAND CA 91784

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

TITLE AS ☐ Delete
NAME KUHBACH, ROBERT G
STREET ADDRESS 80 EAST END AVENUE, APT. 19C
CITY-ST-ZIP NEW YORK NY 10028

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:

Mark Miller, VP Finance

[Signature]

5/2/00

909-625-9308

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)