| 2000 UNIFORM BUSINESS REPORT (UBR) | | | | | | | | |
|---|---|---|------|-------------------------------|---|---|---------------------------|-------------------------------|
| DOCUMENT # F9700001580 1. Entity Name COPPER KEY TECHNOLOGIES, INC. | | | | | | FILED Aug 04, 2000 8:00 am Secretary of State 08-04-2000 90002 033 ***550.00 | | |
| Principal Place of Business 1921 S. ALMA SCHOOL RD. SUITE 101 MESA AZ 85210-3037 | | Mailing Address 1921 S. ALMA SCHOOL RD. SUITE 101 MESA AZ 85210-3037 | | | | | | |
| 2. Principal Place of Bus 459 N | 3. Mailing Address 459 N. Gilbert Rd. | | | • | | | | |
| Suite, Apt. # etc. #B-100 | | Suite, Apt. #, etc. #B-100 | | | | DO NOT WRITE IN | THIS SPACE | |
| City & State Gilbert, AZ | | City & State Gilbert, AZ | | | 4. 1 | FEI Number 86-0854599 | | Applied For Not Applicable |
| Zip 85234 | | Zip-85234 | Coun | try US | 5. (| Certificate of Status Desired | \$8.75 Fee Requ | Additional |
| 6. Nan | e and Address of Current R | egistered Agent | | | 7. † | Name and Address of New Regist | | |
| | | | | | ame | | | |
| Rollins, John P 402 N. High Point Drive Cocoa FL 32926 | | | | Street Ac | et Address (P.O. Box Number is Not Acceptable) | | | |
| | | | | City | · · · · · · · | | FL Zip C | 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. 1/31/0 SIGNATURE Signard, 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 FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May | | | | | | | .00 May Be | |
| Tax filing requirement and elects to do so. After SEPTEMBER 13, (See criteria on back) Make Check Payable | | | | | | Trust Fund Contribution. | | ded to Fees |
| STREET ADDRESS 1921 S | CASTILLO, DAVID | | | E Et address -St-Zip | 459 N. GILBERT RD. #B-100 | | | je 🗌 Addition 🔞 |
| TITLE V NAME ROLLIN STREET ADDRESS 402 N | V Delete ROLLINS, JOHN 402 N HIGH POINT DRIVE COCOA FL 32926 | | | E ET ADDRESS | GILBERT AZ 85234 P Change Addition ANDERSON, DONALD V. 459 N. GILBERT RD. #B-100 GILBERT AZ 85234 | | | |
| TITLE S NAME BANKS STREET ADDRESS 402 N | S Delete | | | e et address - st - zip | D Change Addition TODD STEVENS 1 S. MAIN ST. SUITE 1400 SALT LAKE CITY UT 84133 | | | |
| STREET ADDRESS 1921 S | MONTOYA, DAVID ^{SS} 1921 S. ALMA SCHOOL RD. SUITE 101 | | | E Et address - St- Zip | | INS, JOHN N. HIGH POINT DF A FL 32926 | 🔀 Chang | je 🗌 Addition |
| STREET ADDRESS 402 N | Berts, Malcolm High Point Drive A FL 32926 | Delete | | | | | 🗌 Chanç | e 🗋 Addition |
| CITY-ST-ZIP COCO/ | High Point Drive | Delete | CITY | et address - St- Zip | | | Chang | |
| 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 trystee 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 OF PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR | | | | | | | | |