

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90107 017 ***158.75

DOCUMENT # F97000004321

1. Entity Name

TELANTIS VENTURE PARTNERS V, INC.

Principal Place of Business

**12511 WORLD PLAZA LANE
 FT. MYERS FL 33907**

Mailing Address

**12511 WORLD PLAZA LANE
 FT MYERS FL 33907
 US**

2. Principal Place of Business

2180 IMMOKALEE RD

3. Mailing Address

2180 IMMOKALEE RD

Suite, Apt. #, etc.

SUITE 311

Suite, Apt. #, etc.

SUITE 311

City & State

NAPLES FL

City & State

NAPLES FL

Zip

34110

Country

USA

Zip

34110

Country

USA

4. FEI Number

65-0761765

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

ACCIPITER II, INC.

**12511 WORLD PLAZA LANE
 FT. MYERS FL 33907**

7. Name and Address of New Registered Agent

Name **ACCIPITER II CORP.**

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

2180 IMMOKALEE RD

SUITE 311

City

NAPLES

FL

Zip Code

34110

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

Gerald J. Gabriel

Pres

4/08/02

(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, 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 **C** ☐ Delete

NAME **MEYERSON, ROBERT F**
 STREET ADDRESS **791 WYE RD**
 CITY-ST-ZIP **AKRON OH 44333**

TITLE **VSD** ☐ Delete

NAME **MURPHY, ELIZABETH S**
 STREET ADDRESS **791 WYE ROAD**
 CITY-ST-ZIP **AKRON OH 44333**

TITLE **DPC** ☒ Delete

NAME **DYER, RICHARD W**
 STREET ADDRESS **791 WYE RD**
 CITY-ST-ZIP **AKRON OH 44333**

TITLE **DEVP** ☒ Delete

NAME **MEYERSON, DAVID W**
 STREET ADDRESS **791 WYE RD**
 CITY-ST-ZIP **AKRON OH 44333**

TITLE **T** ☒ Delete

NAME **GOREK, KATHY J**
 STREET ADDRESS **791 WYE RD.**
 CITY-ST-ZIP **AKRON OH 44333**

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P,D** ☐ Change ☒ Addition

NAME **GERALD J. GABRIEL**
 STREET ADDRESS **791 WYE RD**
 CITY-ST-ZIP **AKRON, OH 44333**

TITLE **VP, S, T, D** ☐ Change ☒ Addition

NAME **ALEX L. CSISZAR**
 STREET ADDRESS **791 WYE RD**
 CITY-ST-ZIP **AKRON, OH 44333**

TITLE **ASSIS. S., ASSIS. T.** ☐ Change ☒ Addition

NAME **ELINOR M. CULOTTA**
 STREET ADDRESS **791 WYE RD**
 CITY-ST-ZIP **AKRON, OH 44333**

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:

Gerald J. Gabriel

4/8/02

330-666-6380

Date

Daytime Phone #

CR2E034 (9/01)