

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000004709

1. Entity Name

DULUTH PCS, INC.

FILED

Feb 19, 2001 8:00 am
Secretary of State

02-19-2001 90047 049 ***150.00

C0022652



DO NOT WRITE IN THIS SPACE

Principal Place of Business

1245 W. FAIRBANKS, STE. 380
WINTER PARK FL 32789-4878

Mailing Address

1245 W. FAIRBANKS, STE. 380
WINTER PARK FL 32789-4878

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3434087

Applied For

Not Applicable

Zip

Country

Zip

Country

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

VEGA, RICHARD L
1245 W. FAIRBANKS, STE. 380
WINTER PARK FL 32789-4878

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CP ☐ Delete
NAME VEGA, RICHARD L
STREET ADDRESS 1245 W. FAIRBANKS, STE. 380
CITY-ST-ZIP WINTER PARK FL 32789-4878

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

TITLE D ☐ Delete
NAME WALKER, WILLIAM
STREET ADDRESS 28 OLD FULTON ST., APT. 5A
CITY-ST-ZIP BROOKLYN NY 11201

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

TITLE D ☐ Delete
NAME ENOCHS, JAMES W JR.
STREET ADDRESS 416 RANDOLPH RD.
CITY-ST-ZIP HOPEWELL VA 23860

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

TITLE D ☐ Delete
NAME DEITZ, MICHAEL
STREET ADDRESS 5211 W. 64TH TERR.
CITY-ST-ZIP PRAIRIE VILLAGE KS 66208

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/14/01 402-639-6540

CR2E034 (10/00)