

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State
 05-10-2001 90075 048 ***150.00

DOCUMENT # F98000004234

1. Entry Name

OneSource Customer Care Center, Inc.

Principal Place of Business

1600 Parkwood Circle
 Suite 400
 Atlanta, GA 30339

Mailing Address

4800 N. Federal Hwy
 Suite 200B
 Boca Raton, FL 33431

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

65-0852375

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

A0062753

6. Name and Address of Current Registered Agent

Corporation Service Company
 1201 Hays Street
 Tallahassee, FL 32301-2525

7. Name and Address of New Registered Agent

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D Peter Gaze 4800 N. Federal Hwy. #200B Boca Raton, FL 33431	
P Richard Kissane 1600 Parkwood Circle, #400 Atlanta, GA 30339	<input type="checkbox"/> Change <input type="checkbox"/> Addition
George A. Williams 1600 Parkwood Circle #400 Atlanta, GA 30339	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D/V/S Steven J. Levine 4800 N. Federal Hwy., Suite 200B Boca Raton, FL 33431	<input type="checkbox"/> Change <input type="checkbox"/> Addition
T Ann M. Oibert 4800 N. Federal Hwy. #200B Boca Raton, FL 33431	<input type="checkbox"/> Change <input type="checkbox"/> Addition
AS Roger Gebhard 4800 N. Federal Hwy. #200B Boca Raton, FL 33431	<input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roger Gebhard

4/10/01

Date

561-368-3899

Daytime Phone #

CR2E034 (11/00)