

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000005193

1. Entity Name

FIRST DOMINION TECHNOLOGY, INC.

FILED

Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90205 042 ***150.00

Principal Place of Business

Mailing Address

~~% CT CORPORATION~~
2907 BAY TO BAY BLVD STE 200
TAMPA FL 33629

~~% CT CORPORATION~~
2907 BAY TO BAY BLVD STE 200
TAMPA FL 33629-0161

2. Principal Place of Business

7650 Courtney Campbell Cswy
Suite, Apt. #, etc.

3. Mailing Address

7650 Courtney Campbell Cswy
Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33607

Country

US

Zip

33607

Country

US



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3530298

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

KRUSEN, W. A JR

2907 BAY TO BAY BLVD, STE 200

TAMPA FL 33629

Name

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

7650 Courtney Campbell Cswy

Suite 1120

City

Tampa

FL

Zip Code

33607

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

W. A. Krusen

3-15-00

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 PCEO ☐ Delete
NAME BIDDINGER, CLAY M
STREET ADDRESS 2841 COBBLESTONE DRIVE
CITY-ST-ZIP PALM HARBOR FL 34684

TITLE Chairman & CEO ☒ Change ☐ Addition
NAME Biddinger, Clay M
STREET ADDRESS 7650 Courtney Campbell Cswy, 1120
CITY-ST-ZIP Tampa, FL 33607

TITLE VCOF ☒ Delete
NAME COTTRELL, JAMES H
STREET ADDRESS 3205 NUTLEY COURT
CITY-ST-ZIP RICHMOND VA 23233

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

TITLE T ☐ Delete
NAME KRUSEN, W A JR
STREET ADDRESS 2907 BAY TO BAY BLVD, STE. 200
CITY-ST-ZIP TAMPA FL 33629

TITLE President & Treasurer ☒ Change ☐ Addition
NAME Krusen, W A JR
STREET ADDRESS 7650 Courtney Campbell Cswy, 1120
CITY-ST-ZIP Tampa, FL 33607

TITLE S ☐ Delete
NAME THOMPSON, W M JR
STREET ADDRESS 250 WEST MAIN STREET, STE 300
CITY-ST-ZIP CHARLOTTESVILLE VA 22902

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:

W. A. Krusen

3-15-00

813-837-3009

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)