

4/17

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 21, 2001 8:00 am**  
**Secretary of State**

04-17-2001 90085 040 \*\*\*158.75

**DOCUMENT # F99000001645**

1. Entity Name

**MINDLOFT CONSULTING, INCORPORATED**

Principal Place of Business

Mailing Address

**326 GREEN ACRES ROAD**  
**SUITE A**  
**FORT WALTON BEACH FL 32547**

**326 GREEN ACRES ROAD**  
**SUITE A**  
**FORT WALTON BEACH FL 32547**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **75-2720102**

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

**ROY, MALCOLM**  
**326 GREEN ACRES ROAD SUITE A**  
**FORT WALTON BEACH FL 32547**

Name

**HACKNEY, ROBERT C**

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

**CITY CENTRE****2000 PGA BLVD., SUITE 4110**

City

**NORTH PALM BEACH****FL**

Zip Code

**33408**

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	<del>CEO</del> P	<input type="checkbox"/> Delete
NAME	ROY, MALCOLM	
STREET ADDRESS	315 HOLLYWOOD BLVD., SUITE 2	
CITY-ST-ZIP	MARY ESTHER FL 32569	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	SIGLER, MOYA	
STREET ADDRESS	326 GREEN ACRES ROAD	
CITY-ST-ZIP	FORT WALTON BEACH FL 32547	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	TYNER, ELSIE J	
STREET ADDRESS	326 GREEN ACRES ROAD	
CITY-ST-ZIP	FORT WALTON BEACH FL 32547	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	RENO, ROBERT	
STREET ADDRESS	326 GREEN ACRES ROAD	
CITY-ST-ZIP	FORT WALTON BEACH FL 32547	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIGLER, MOYA	
STREET ADDRESS	326 GREEN ACRES ROAD	
CITY-ST-ZIP	FORT WALTON BEACH, FL 32547	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TYNER, ELSIE J	
STREET ADDRESS	326 GREEN ACRES ROAD	
CITY-ST-ZIP	FORT WALTON BEACH, FL 32547	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

SECRETARY

MOYA SIGLER - SEESE

4/9/01

850 862 1668

Date

Daytime Phone #

CR2E034 (10/00)