

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000002537

1. Entity Name
USA DIGITAL OF NEVADA, INC.

FILED
May 18, 2001 8:00 am
Secretary of State
05-18-2001 91665 001 ***450.00

Principal Place of Business
100 W. LUCERNE CIRCLE
SUITE 600
ORLANDO FL 32801

Mailing Address
P.O. BOX 172574
TAMPA FL 33672-0574

2. Principal Place of Business
601 S. HARBOUR ISL BLVD
Suite, Apt. #, etc.
Suite 103
City & State
TAMPA FL
Zip
33602
Country
USA

3. Mailing Address
601 S. HARBOUR ISL BLVD
Suite, Apt. #, etc.
Suite 103
City & State
TAMPA FL
Zip
33602
Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3560920
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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
PSTD COBB, MARK D 2440 CEDARCREST PLACE VALRICO FL 33594
D DARDEN, DONALD E 1134 OX BOTTOM RD. TALLAHASSEE FL 32312
CEOD LYONS, PETER J 8413 RIVER BRANCH PLACE SANFORD FL 32771-8356
V ALLEN, KENNETH D 119 E. LAUREL AVENUE HOWEY IN THE HILLS FL 34737
D MONTAGUE, DANIEL J 100 W. LUCERNE CIRCLE, STE. 600 ORLANDO FL 32801

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP
P, T, D 601 S. Harbour Island Blvd, Suite 103 Tampa FL 33602
601 S. Harbour Island Blvd, Suite 103 Tampa FL 33602
601 S. Harbour Island Blvd, Suite 103 Tampa FL 33602
601 S. Harbour Island Blvd, Suite 103 Tampa FL 33602
SECRETARY CAROLYN SUE McCAMMON 601 S. Harbour Island Blvd, Suite 103 Tampa FL 33602

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607.03, Florida Statutes; 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: Carolyn Sue McCammon Carolyn Sue McCammon 4/30/01 813-221-8373
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)