

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003718

1. Entity Name

SMARTPORTFOLIO.COM, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90183 021 ***150.00

Principal Place of Business

Mailing Address

1400 GRASSLANDS BLVD., STE #9
 LAKELAND FL 33803

1400 GRASSLANDS BLVD., STE #9
 LAKELAND FL 33803-5451

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

54-1895501

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCLAUGHLIN, CHRIS
 1400 GRASSLANDS BLVD, STE #9
 LAKELAND FL 33803

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, 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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PSTD
 MCLAUGHLIN, CHRIS
 1400 GRASSLANDS BLVD., STE #9
 LAKELAND FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VD
 Patrick D. McConnell
 5515 Scott View Lane
 Lakeland, FL ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VD
 FOGEL, DAVID L
 9 ABBEY WOODS
 PITTSFORD NY ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VD
~~Gregory D. Bassuk~~ David L. Fogel
 1100 Oakbridge Pkwy, #197
 Lakeland, FL ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VD
 MCLAUGHLIN, ANNE
 1425 SEVILLE PLACE
 LAKELAND FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VD
 Anne McLaughlin
 1425 Seville Place
 Lakeland, FL ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 V
 STOCKMAN, MARC
 1820 NORTH QUINN STREET APT 201
 ARLINGTON VA ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 V
 Gregory D. Bassuk
 1100 Oakbridge Pkwy, #197
 Lakeland, FL ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 V
 KUMAR, RAJ
 67 OLD BEAVER RUN ROAD
 LAFAYETTE NJ ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

David L. Fogel
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/7/00 863-687-8864
 Date Daytime Phone #

CR2E034 (9/99)