

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2000 8:00 am
Secretary of State
 05-05-2000 90047 032 ***150.00

DOCUMENT # F99000004724
1. Entity Name
 CyberSentry, Inc.

Principal Place of Business **Mailing Address**

2. Principal Place of Business **3. Mailing Address**
 412 East Madison Street 412 East Madison Street
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 Suite 1200 Suite 1200
 City & State City & State
 Tampa, Florida Tampa, Florida
 Zip Country Zip Country
 33602 USA 33602 USA

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 National Registered Agents, Inc.
 526 East Park Avenue
 Tallahassee, FL 32301

4. FEI Number **Applied For**
 22-3626108 ☒ Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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 _____ (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. ☐ **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** ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE	President	☒ Delete
NAME	Gerald A. Resnick	
STREET ADDRESS	420 E. 64 Street	
CITY-ST-ZIP	New York, NY 10021	
TITLE	Treasurer	☒ Delete
NAME	Kenneth Fedorcek	
STREET ADDRESS	412 E. Madison St., #1200	
CITY-ST-ZIP	Tampa, FL 33602	
TITLE	Director	☒ Delete
NAME	Phillip Gambell	
STREET ADDRESS	412 E. Madison Street, #1200	
CITY-ST-ZIP	Tampa, FL 33602	
TITLE	Director	☒ Delete
NAME	Steve Frank	
STREET ADDRESS	412 E. Madison Street, #1200	
CITY-ST-ZIP	Tampa, FL 33602	
TITLE	Chief Financial Officer	☒ Delete
NAME	Jim DeDore	
STREET ADDRESS	412 E. Madison Street, #1200	
CITY-ST-ZIP	Tampa, FL 33602	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	☐ Change ☒ Addition
NAME	Frank Kristan	
STREET ADDRESS	43 Deshon Avenue	
CITY-ST-ZIP	Bronxville, NY 10708	
TITLE	Director	☐ Change ☒ Addition
NAME	Frank Kristan	
STREET ADDRESS	43 Deshon Avenue	
CITY-ST-ZIP	Bronxville, NY 10708	
TITLE	Director	☐ Change ☒ Addition
NAME	Gil Raker	
STREET ADDRESS	1 Labriola Court	
CITY-ST-ZIP	Armonk, NY 10504	
TITLE	Director	☐ Change ☒ Addition
NAME	Frank Conklin	
STREET ADDRESS	97 Church Road	
CITY-ST-ZIP	Easton, CT 06612	
TITLE	Director	☐ Change ☒ Addition
NAME	Ed Dowling, Jr.	
STREET ADDRESS	1126 Broadway, PO Box 367	
CITY-ST-ZIP	West Long Branch, NJ 07764	
TITLE	Director and Secretary	☐ Change ☒ Addition
NAME	Hal Shankland	
STREET ADDRESS	412 E. Madison Street, #1200	
CITY-ST-ZIP	Tampa, FL 33602	

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: _____ **4/25/00 813-228-0688**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)