

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H77009

1. Entity Name  
SYSTEMS PERFORMANCE ENGINEERING, INC.

**FILED**  
**May 24, 2002 8:00 am**  
**Secretary of State**

05-24-2002 91385 023 \*\*\*150.00

Principal Place of Business

PO BOX 551260  
JACKSONVILLE FL 32255  
US

Mailing Address

PO BOX 551260  
JACKSONVILLE FL 32255  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2585460

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SCHNEIDER, MICHAEL N  
5150 BELFORT RD  
BLDG 100  
JACKSONVILLE FL 32256

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 of the principal or registered agent and title if applicable

(NOTE: Registered Agent's signature required when re-statuting)

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, 2002 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	OTTEN, PETER J	3634 CAMELLIA BAY DRIVE SOUTH	JACKSONVILLE FL 32223				
DST	OTTEN, SHERRIE	3634 CAMELLIA BAY DRIVE S	JACKSONVILLE FL 32223				

**SIGN  
HERE**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/02

Date