

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H92996

1. Entity Name

PHOTOGRAMMETRIC TECHNOLOGIES, INC.

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90155 014 ***158.75

Principal Place of Business

Mailing Address

% DEAN L. GREENO
2028 PALMETTO STREET
CLEARWATER FL 33765

% DEAN L. GREENO
2028 PALMETTO STREET
CLEARWATER FL 33765-2117

638337



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2653711

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

GREENO, DEAN L.
2028 PALMETTO STREET
CLEARWATER FL 33765

Name Greeno Jerry D
Street Address (P.O. Box Number is Not Acceptable)
2028 Palmetto St.
City Clearwater FL Zip Code 33765

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]* President (Jerry D. Greeno) 4-11-2000
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 PD
NAME GREENO, DEAN L.
STREET ADDRESS 1624 SHELDON DR
CITY-ST-ZIP CLEARWATER FL ☐ Delete

TITLE P/D
NAME Jerry D. Greeno
STREET ADDRESS 5664 Bridgeton CT
CITY-ST-ZIP Palm Harbor FL 34685 ☒ Change ☐ Addition

TITLE VD
NAME GREENO, JOYCE A.
STREET ADDRESS 1624 SHELDON DR
CITY-ST-ZIP CLEARWATER FL ☐ Delete

TITLE V/D
NAME Dean L. Greeno
STREET ADDRESS 1624 Sheldon Dr.
CITY-ST-ZIP Clearwater, FL 33764 ☒ Change ☐ Addition

TITLE TD
NAME GREENO, JERRY D.
STREET ADDRESS 5664 BRIDGETON CT
CITY-ST-ZIP PALM HARBOR FL 34685 ☐ Delete

TITLE V/D
NAME Joyce A. Greeno
STREET ADDRESS 1624 Sheldon Dr.
CITY-ST-ZIP Clearwater, FL 33764 ☒ Change ☐ Addition

TITLE S
NAME NORTH, LINDA K.
STREET ADDRESS 1856 NORTHWOOD DRIVE
CITY-ST-ZIP CLEARWATER FL ☐ Delete

TITLE S/T/D
NAME Linda K. North
STREET ADDRESS 1856 Northwood Dr.
CITY-ST-ZIP Clearwater, FL. 33764 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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: *[Signature]* (727)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-00 442-1918
Date Daytime Phone #

CR2E034 (9/99)