

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L03251

1. Entity Name

ACUERA CORP.

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

05-18-2000 90343 040 ***150.00

Principal Place of Business % RICHARD J MIDULLA 16313 N DALE MABRY HWY TAMPA FL 33618 US	Mailing Address P. O. BOX 272000 TAMPA FL 33688-2000 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2961273		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MIDULLA, RICHARD J 16313 NORTH DALE MABRY HWY. TAMPA FL 33618		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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. (See criteria on back) <input type="checkbox"/>	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. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRAKE, JOHN HWY 27 SOUTH MOOREHAVEN FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRAKE, JOHN 1190 US HWY 27 EAST MOOREHAVEN FL 33471 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MULCAY, WILLIAM T US HWY 17 NORTH WAUCHULA FL 33873 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEPPARD, WILSON US HWY 301 AT 471 SUMTERVILLE FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEPPARD WILSON 293 SOUTH US 301 SUMTERVILLE FL 33585 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIVENBARK, BENNIE 14651 21ST STREET DADE CITY FL 33525 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PHILLIPS, WILLIAM C. 225 WEST WALKER DR KEYSTONE HEIGHTS 32656 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DUREN, JIM 16313 N DALE MABRY HWY TAMPA FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHEARER, STEVEN R. 16313 N DALE MABRY HWY TAMPA FL 33618 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MIDULLA, RICHARD 16313 N DALE MABRY HWY TAMPA FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MIDULLA, RICHARD J. 16313 N DALE MABRY HWY TAMPA FL 33618 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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: John Geeraerts JOHN GEERAERTS 4/28/00 (813)963-0994
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

L03251

Attachment
73781

ACUERA CORP.
16313 N. DALE MABRY HIGHWAY
TAMPA, FLORIDA 33618

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12. NAMES AND STREET ADDRESSES OF EACH OFFICER AND DIRECTOR (CONTINUED)

<u>TITLE</u>	<u>NAMES OF OFFICERS AND DIRECTORS</u>	<u>STREET ADDRESS OF EACH OFFICER AND DIRECTOR</u>	<u>CITY, STATE, ZIP</u>
S	TIMOTHY S. WOODBURY	16313 N. DALE MABRY HWY.	TAMPA, FL 33618
T	JOHN W. GEERAERTS	16313 N. DALE MABRY HWY.	TAMPA, FL 33618