

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L08737

1. Entity Name

ADVANCED SURVEYING TECHNOLOGY, INC.

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90079 008 ***158.75

Principal Place of Business

Mailing Address

815 EYRIE DR.
STE. 4
OVIEDO FL 32765
US

814 EYRIE DR.
STE. 4
OVIEDO FL 32765-6555
US

2. Principal Place of Business

815 Eyrie Drive
Suite Apt. #, etc.
4

3. Mailing Address

815 Eyrie Drive
Suite Apt. #, etc.
4

City & State

Oviedo, FL

City & State

Oviedo, FL

4. FEI Number

59-2964205

Applied For

Not Applicable

Zip

32765

Country

USA

Zip

32765

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRADHAM, CESAR H
1007 WILLOW LAKE CIRCLE
OVIEDO FL 32765

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

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

TITLE DPST
NAME BRADHAM, CESAR H.
STREET ADDRESS 1007 WILLOW LAKE CIR.
CITY-ST-ZIP OVIEDO FL 32765 ☐ Delete

TITLE VP
NAME GLENDA BRADHAM
STREET ADDRESS 1007 WILLOW LAKE CIRCLE
CITY-ST-ZIP OVIEDO FL 32765 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE Director VP
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE Vice President
NAME Holly E Bradham
STREET ADDRESS 5151 Jolly Oaks Drive
CITY-ST-ZIP Wmtn Pkwy, FL 32792 ☐ Change ☒ Addition

TITLE Vice President
NAME JOYCE B. BANCIA
STREET ADDRESS 2425 Whopping Crane Drive
CITY-ST-ZIP DeLeon Spgs, FL 32130 ☐ Change ☒ Addition

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

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:

Cesar H. Bradham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)