2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 12, 2000 8:00 am DOCUMENT # 1 34060 1. Entity Name **Secretary of State** PHOCON, INC. 01-12-2000 90029 020 ***158.75 Mailing Address Principal Place of Business 4723 PINFISH COURT SOUTHWEST 4723 PINFISH COURT SOUTHWEST BONITA SPRINGS FL 34134-7101 BONITA SPRINGS FL ### 34/34-7/0/ LIS 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2982196 Not America **\$8.75** Additional Country Zip Country Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MURDOCK, RICHARD E Street Address (P.O. Box Number is Not Acceptable) 4723 PINFISH COURT SOUTHWEST BONITA SPRINGS FL 3555 City 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filling requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Delete TITLE TITLE NAME MURDOCK, RICHARD E. NAME STREET ADDRESS STREET ADDRESS 4723 PINFISH CT S.W. CITY-ST-ZIP BONITA SPRINGS FL -34/34 CITY-ST-ZIP _ · · · · · ☐ Change TITLE ☐ Delete TID F NAME MURDOCK, PAULA A. NAME STREET ADDRESS STREET ADDRESS 4723 PINFISH CT. S.W. CITY-ST-ZIP CITY-ST-ZIP BONITA SPRINGS FL ヨ チノタケ L ****** ☐ Change Delete TITLE TITLE DRUEDING, CHARLES P NAME STREET ADDRESS STREET ADDRESS 4723 PINFISH CT. S.W. BONITA SPRINGS FL 34134 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME DRURUING, INCIDENTAL SERVINGS FL. 34134 DRURDING, NANCY J NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP