

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L 72737**

1. Entity Name
M-FLEX CORPORATION

FILED
2001 MAY -3 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

10151 Deerwood Park Blvd 10151 Deerwood Park Blvd
Bldg 400, Ste 350 Bldg 400, Ste 350
Jacksonville, FL 32256-0592 Jacksonville, FL 32256-0592

2. Principal Place of Business 3. Mailing Address

10151 Deerwood Park Blvd 10151 Deerwood Park Blvd
Suite, Apt. #, etc. Suite, Apt. #, etc.
Bldg 400, Ste 350 Bldg 400, Ste 350
City & State City & State
Jacksonville, FL 32256-0592 Jacksonville, FL 32256-0592
Zip Country Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For

59-3010079 Not Applicable

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

Dominick, E. Lester Name
10151 Deerwood Park Blvd Street Address (P.O. Box Number is Not Acceptable)
Bldg 400, Ste. 350 City
Jacksonville, FL 32256-0592 **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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**

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Dominick, E L 10151 Deerwood Park Blvd Bldg 400, Ste 350 Jacksonville, FL 32256-0592	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO Dahlenburg, William 10151 Deerwood Park Blvd Bldg 400, Ste 350 Jacksonville, FL 32256-0592	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition

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******450.00 ****150.00**

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: **William Dahlenburg, CFO** 04/26/01 (904)356-2490

CR2E034 (11/00)