

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 26, 2000 8:00 am**  
**Secretary of State**

04-26-2000 90058 046 \*\*\*150.00

A0047006



DO NOT WRITE IN THIS SPACE

**DOCUMENT # M69455**

1. Entity Name  
**TRENT COMMUNICATIONS, INC.**

Principal Place of Business Mailing Address  
 1670 SUNDANCE DR 1670 SUNDANCE DR  
 ST CLOUD FL 34771 ST CLOUD FL 34771-7901

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-2872931** Applied For  
 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

TRENT, CINDY-P  
 1670 SUNDANCE DR  
 ORLANDO FL 34771

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
 NAME TRENT, BILLY H.  
 STREET ADDRESS 1670 SUNDANCE DR  
 CITY-ST-ZIP ST CLOUD FL 34771 ☒ Delete

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

TITLE PDT  
 NAME TRENT, CINDY P.  
 STREET ADDRESS 1670 SUNDANCE DR  
 CITY-ST-ZIP ST CLOUD FL 34771 ☐ Delete

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

TITLE S  
 NAME HOEQUIST, CHARLES E  
 STREET ADDRESS 3101 MAGUIRE BLVD., STE. 101  
 CITY-ST-ZIP ORLANDO FL 32803 ☒ Delete

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

TITLE SECRETARY  
 NAME STEPHEN G. MEYER  
 STREET ADDRESS 1670 SUNDANCE DR.  
 CITY-ST-ZIP ST. CLOUD, FL. 34771 ☐ Delete

TITLE SECRETARY  
 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

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]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-00

Date Daytime Phone #

CR2E034 19/99