

4/2

4/2

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 21, 2001 8:00 am**  
**Secretary of State**

04-23-2001 90028 007 \*\*\*\*61.25

**DOCUMENT # N00000008102**

1. Entity Name

**VOLUSIA FLAGLER ADVANCED TECHNOLOGY CENTER, INC.**

Principal Place of Business

1200 WEST INTERNATIONAL SPEEDWAY BLVD.  
 BUILDING 16 - ROOM 228  
 DAYTONA BEACH FL 32120-2811

Mailing Address

1200 WEST INTERNATIONAL SPEEDWAY BLVD.  
 BUILDING 18 - ROOM 228  
 DAYTONA BEACH FL 32120-2811

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

59-1211226

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**NOVELL, SIDNEY M**  
**48 OLD KINGS ROAD NORTH**  
**PALM COAST FL 32137**

**Stanley Sidor**  
**1200 International**  
**Speedway Blvd.**  
**Daytona Beach, FL**  
**32120**

7. Name and Address of New Registered Agent

Name **Stanley Sidor**

Street Address (P.O. Box Number is Not Acceptable)

**1200 International Speedway Blvd.**City **Daytona Beach**

FL

Zip Code **32120**

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)

RECEIVED

6/14/01

APR 16 2001

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**DRUG ACCOUNTS PAYABLE**  
**Department of State**

10. OFFICERS AND DIRECTORS

☐ Delete

**D**  
**SHARPLES, KENT DR.**  
**POST OFFICE BOX 2811**  
**DAYTONA BEACH FL 32114-2811**

☐ Delete

**D**  
**COLEMAN, ROBERT MR.**  
**POST OFFICE BOX 2851**  
**DAYTONA BEACH FL 32114-2811**

☐ Delete

**D**  
**FAGAN, LYNNE MS.**  
**1031 SOUTH BEACH STREET**  
**DAYTONA BEACH FL 32114**

☐ Delete

**D**  
**FRASER, RICK MR.**  
**9 AVIATOR WAY**  
**ORMOND BEACH FL 32174**

☐ Delete

**D**  
**HARRIS, MARY J MS.**  
**4500 PALM COAST PARKWAY**  
**PALM COAST FL 32137**

☐ Delete

**PD**  
**LEWIS, WILLIAM A MR.**  
**POST OFFICE BOX 15165**  
**DAYTONA BEACH FL 32115**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition

**Warnungwa Walter Mr.**  
**489 Turnbull Bay Road**  
**New Smyrna Beach, FL 32168**

☐ Change ☐ Addition

**Zahnönnömm Mr.**  
**12 Southland Ave.**  
**Ormond Beach, FL 32174**

☐ Change ☐ Addition

**Petröckyoöbe Mr.**  
**Post Office Box 2490**  
**Daytona Beach, FL 32115**

☐ Change ☐ Addition

**Ghyabi, Maryam Mrs.**  
**555 W. Granada Blvd. Suite C-12**  
**Ormond Beach, FL 32174**

☐ Change ☐ Addition

**Page, Bruce Mr.**  
**21 Cypress Point Parkway**  
**Palm Coast, FL 32164**

☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stanley Sidor, Director

4/4/01

(386) 947-5526

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2007 (10/00)