

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91785 036 ***150.00

DOCUMENT # P00000021592

1. Entity Name
NAVIANT, INC.



Principal Place of Business
999 YAMATO ROAD, 3RD FLOOR
BOCA RATON, FL 33431

Mailing Address
999 YAMATO ROAD, 3RD FLOOR
BOCA RATON, FL 33431

11041645



2. Principal Place of Business

3. Mailing Address

P.O. Box 4081

☐ CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

ATLANTA, GA

4. FEI Number

65-1024199

Applied For

Not Applicable

Zip

Country

Zip

30302

Country

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be

Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MAST, KENT E
STREET ADDRESS 1550 PEACHTREE ST. N.W.
CITY-ST-ZIP ATLANTA, GA 30309

☐ Delete

TITLE SD
NAME GROOME, LEIGH ANN
STREET ADDRESS 999 YAMATO ROAD, 3RD FLOOR
CITY-ST-ZIP BOCA RATON, FL 33431

☒ Delete

TITLE ASD
NAME CINNAMON, GREGORY K
STREET ADDRESS 999 YAMATO ROAD
CITY-ST-ZIP BOCA RATON, FL 33431

☒ 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SD
NAME KENT E. MAST
STREET ADDRESS
CITY-ST-ZIP

☒ Change

☐ Addition

TITLE P
NAME MARK E. MILLER
STREET ADDRESS 1550 PEACHTREE ST.
CITY-ST-ZIP ATLANTA, GA 30309

☐ Change

☒ Addition

TITLE V
NAME MICHAEL BRAUSER
STREET ADDRESS 999 YAMATO RD.
CITY-ST-ZIP BOCA RATON, FL 33431

☐ Change

☒ Addition

TITLE T
NAME MICHAEL G. SCHIRK
STREET ADDRESS 1550 PEACHTREE ST.
CITY-ST-ZIP ATLANTA, GA 30309

☐ Change

☒ Addition

TITLE AS
NAME KATHRYN J. HARRIS
STREET ADDRESS 1550 PEACHTREE ST.
CITY-ST-ZIP ATLANTA, GA 30309

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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 607, 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:

Kathryn J. Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/03

(404)885-8412

CR2

Daytime Phone #

CR2E034 (10/02)