

2001 UNIFORM BUSINESS REPORT (UBR)

1/3

FILED
Mar 09, 2001 8:00 am
Secretary of State

01-31-2001 90274 016 ***150.00

DOCUMENT # P00000024561

1. Entity Name

METHODFACTORY, INC.

Principal Place of Business

6694 SCHOONER BAY CIRCLE
SARASOTA FL 34231

Mailing Address

6694 SCHOONER BAY CIRCLE
SARASOTA FL 34231

29382



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

240 N. Washington Blvd

3. Mailing Address

240 N. Washington Blvd

Suite, Apt. #, etc.

Suite 530

Suite, Apt. #, etc.

Suite 530

City & State

Sarasota

City & State

Sarasota

Zip

Florida

Country

Sarasota

Zip

34236

Country

Sarasota

4. FEI Number

65-0990922

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ULRICH, RICHARD A
2940 SOUTH TAMiami TRAIL
SARASOTA FL 34239

7. Name and Address of New Registered Agent

Name ~~Elmer~~ ~~Banker~~ ~~Chiller~~ ~~Levine~~ ~~Brown~~
Street Address (P.O. Box Number, Is Not Acceptable)
240 N Washington Blvd, Suite 530
~~1515 Ringling Blvd~~ ~~Suite 900~~
City ~~Sarasota~~ ~~Sarasota~~ FL Zip Code ~~34236~~
34236

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.

Michael Penman CEO

(NOTE: Registered Agent signature required when reinstating)

1/23/2001

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, 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

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete

NAME D
PENMAN, MICHAEL
STREET ADDRESS 6694 SCHOONER BAY CIRCLE
CITY - ST - ZIP SARASOTA FL 34231

TITLE ☐ Delete

NAME D
WILLIAMSON, JAMES
STREET ADDRESS 6694 SCHOONER BAY CIRCLE
CITY - ST - ZIP SARASOTA FL 34231

TITLE ☐ Delete

NAME D
BRADY, MICHAEL
STREET ADDRESS 6694 SCHOONER BAY CIRCLE
CITY - ST - ZIP SARASOTA FL 34231

TITLE ☐ Delete

NAME D
Jim Bailey
STREET ADDRESS 240 N. Washington Blvd
CITY - ST - ZIP Sarasota, FL 34236

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY - ST - ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY - ST - ZIP

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NAME
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TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael Penman

1/23/2001

(941) 364 8161

DATE

Daytime Phone #

CR2E034 (10/00)