

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2001 8:00 am
Secretary of State
 04-12-2001 90003 034 ***150.00

0520919

DOCUMENT # P00000025454

1. Entity Name

ACCURATE NETWORK SYSTEMS, INC.

Principal Place of Business

**8735 WATERWAY DRIVE
 TAMPA FL 33635**

Mailing Address

**8735 WATERWAY DRIVE
 TAMPA FL 33635**

2. Principal Place of Business

14315 PROMONTORY POINT PL
 Suite, Apt. #, etc.

3. Mailing Address

14315 PROMONTORY POINT PLACE
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

TAMPA, FL

City & State

TAMPA, FL

4. FEI Number

59-3631271

Applied For

Not Applicable

Zip

33625

Country

Zip

33625

Country

5. Certificate of Status Desired: ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134**

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.

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, 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 PD
 NAME LUCAS, TROY H ☐ Delete
 STREET ADDRESS 8735 WATERWAY DRIVE
 CITY-ST-ZIP TAMPA FL 33635

TITLE VD
 NAME REIDINGER, JOHN A ☒ Delete
 STREET ADDRESS 8735 WATERWAY DRIVE
 CITY-ST-ZIP TAMPA FL 33635

TITLE V
 NAME CLANCY, PETER J JR ☐ Delete
 STREET ADDRESS 8735 WATERWAY DRIVE
 CITY-ST-ZIP TAMPA FL 33635

TITLE ST
 NAME WESTERDAHL, DWIGHT W ☐ Delete
 STREET ADDRESS 8735 WATERWAY DRIVE
 CITY-ST-ZIP TAMPA FL 33635

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 VD ☒ Change ☐ Addition
 NAME WINN, AMY KATHLEEN
 STREET ADDRESS 14315 PROMONTORY POINT PLACE
 CITY-ST-ZIP TAMPA, FL 33625

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

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

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

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

4-4-2K1 (813) 369-0202

Date

Daytime Phone #

CR2E034 (10/00)