

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

05-05-2003 91441 008 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000044891

1. Entity Name
CONCOURSE, INC.



Principal Place of Business
4520 BRISTOL CT
NICEVILLE, FL 32578

Mailing Address
4520 BRISTOL CT
NICEVILLE, FL 32578

2. Principal Place of Business

80001 Emerald Coast Pkwy
Suite, Apt. #, etc.

3. Mailing Address

276 Marwood Drive
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Destin FL

City & State
Birmingham AL

4. FEI Number
59-3708301

Applied For
Not Applicable

Zip
32541

Country
USA

Zip
35244

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HAWKINS, JOHN W
MATTHEWS & HAWKINS, P.A.
607 HWY 98 E.
DESTIN, FL 32641

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 reinstating)

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 P
NAME BARNIV, CHARLES ☒ Delete
STREET ADDRESS 4520 N. BRISTOL CT
CITY-ST-ZIP NICEVILLE, FL 32578

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/S/T/D
NAME David E. Fleisher ☐ Change ☒ Addition
STREET ADDRESS 276 Marwood Drive
CITY-ST-ZIP Birmingham AL 35244

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Carryme Phone #

David E. Fleisher David E Fleisher

205 905 4042
400 034

CR2E034 (10/02)