

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 15, 2001 8:00 am**  
**Secretary of State**

05-15-2001 90175 022 \*\*\*158.75

DOCUMENT # **P00000053790**

1. Entity Name

DESK @ HOME, INC.

Principal Place of Business

3400 S. TAMiami TRL  
 SARASOTA, FL 34239

Mailing Address

3400 S. TAMiami TRL  
 SARASOTA, FL 34239

2. Principal Place of Business

1863 TAMiami TRL S

3. Mailing Address

1863 TAMiami TRL S

Suite, Apt. #, etc.

SUITE 10

Suite, Apt. #, etc.

SUITE 10

City & State

VENICE, FL

City & State

VENICE, FL

Zip

34293

Country

Zip

34293

Country

4. FEI Number

65-1012760

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

Jefferson F. Riddell  
 3400 South Tamiami Trail  
 Sarasota, FL 34239

7. Name and Address of New Registered Agent

Name

Ronald P. Hogarth

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

312 E. Venice Ave. Suite 120

City

Venice

FL

Zip Code  
 34292

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)

4/15/01

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 D ☐ Delete  
 NAME Thomas A. Canelakes  
 STREET ADDRESS 5855 Midnight Pass Rd  
 CITY-ST-ZIP Siesta Key, FL 34242

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Change ☐ Addition  
 NAME Chris A. Sorensen  
 STREET ADDRESS 8991 Huntinton Pointe Dr  
 CITY-ST-ZIP Sarasota, FL 34238

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

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

Date

Daytime Phone #

CR2E034 (11/00)