

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 12, 2001 8:00 am**
Secretary of State

05-12-2001 90053 020 ***150.00

DOCUMENT # P00000062072

1. Entity Name

TRISTAR CONSULTING GROUP, INC.

Principal Place of Business

**3020 IRONWOOD DR
TALLAHASSEE FL 32330-8**

Mailing Address

**3020 IRONWOOD DR
TALLAHASSEE FL 32330-8**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3655643

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRANTLEY, BOBBY LYNN JR
3020 IRONWOOD DR
TALLAHASSEE FL 32330-8**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PCEO	BRANTLEY, BOBBY LYNN	3020 IRONWOOD DR	TALLAHASSEE FL 32330-8	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
President/CEO	Bobby Lynn Brantley	6659 Doctor Road	Tallahassee, FL 32308	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Executive Vice President	Eric Thorn	550 East Georgia Street	Tallahassee, FL 32308	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Vice President	Bobby Lynn Brantley Jr.	3020 Ironwood Drive	Tallahassee, FL 32308	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 #

4/25/01

(850) 521-0555

CR2E034 (10/00)