

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 16, 2001 8:00 am
Secretary of State

03-16-2001 90053 033 ***150.00

DOCUMENT # P00000101532

1. Entity Name
PERSONAL DEVELOPMENT SYSTEMS, INC.

Principal Place of Business

**1604 REGATTA DR STE 200
 AMELIA ISLAND FL 32034**

Mailing Address

**1604 REGATTA DR STE 200
 AMELIA ISLAND FL 32034**

004018

2. Principal Place of Business

1416 Lewis Street, #201

3. Mailing Address

1416 Lewis Street

Suite, Apt. #, etc.

#201

Suite, Apt. #, etc.

#201

City & State

Amelia Island

City & State

Amelia Island

Zip

32034

Country

U.S.A.

Zip

32034

Country

U.S.A.

4. FEI Number

59-3698841

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**COTTE, STAN
 1604 REGATTA DR STE 200
 AMELIA ISLAND FL 32034**

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 ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 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 ☐ Change ☒ Addition
 NAME **P, D**
 STREET ADDRESS **Stan Cottle**
 CITY-ST-ZIP **1604 REGATTA DRIVE
 AMELIA ISLAND, FL 32034**

TITLE ☐ Change ☒ Addition
 NAME **S, T, D**
 STREET ADDRESS **Theodore L. Tilton**
 CITY-ST-ZIP **1031 Parkview Drive
 Rochelle, IL 61068**

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: **X Stan Cottle, PRESIDENT/CEO**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/01
 Date

904.261.9512
 Daytime Phone #

CR2E034 (10/00)