

2001 UNIFORM BUSINESS REPORT (UBR)

5/4.

FILED**May 23, 2001 8:00 am**
Secretary of State

05-04-2001 90066 036 ***150.00

DOCUMENT # P00000115078

1. Entity Name

GALAXY COMPUTER SERVICES, INC.

Principal Place of Business

**130 PEACH CT.
MARCO ISLAND FL 34145**

Mailing Address

**130 PEACH CT.
MARCO ISLAND FL 34145**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-1065094

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**KEWLEY, MONTE
130 PEACH CT.
MARCO ISLAND FL 34145**

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 NAME ☐ Delete**Pres. Monte Kewley
130 Peach Court
Marco IS, FL 34145**TITLE NAME ☐ DeleteTITLE NAME ☐ DeleteTITLE NAME ☐ DeleteTITLE NAME ☐ DeleteTITLE NAME ☐ DeleteTITLE NAME ☐ DeleteTITLE NAME ☐ DeleteTITLE NAME ☐ DeleteTITLE NAME ☐ DeleteTITLE NAME ☐ Delete12. **Additions/Changes to Officers and Directors in 11**TITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ AdditionTITLE NAME ☐ Change ☐ Addition

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

Monte Kewley

Date

4/27/01

Daytime Phone #

941-642-4358

CR2E034 (10/00)