

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000118032

1. Entity Name
TELEMERCHANT SERVICES, INC.

FILED
Sep 05, 2001 8:00 am
Secretary of State

09-05-2001 90030 025 ***550.00

Principal Place of Business
4231 WALNUT BEND #3
JACKSONVILLE FL 32257

Mailing Address
4231 WALNUT BEND #3
JACKSONVILLE FL 32257

00010010



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3696313

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GLAZIER & GLAZIER, P.A.
8761 PERIMETER PARK BLVD
STE 103
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name
Freddie Rowland

Street Address (P.O. Box Number is Not Acceptable)
4231 WALNUT BEND Suite 3

City
Jacksonville

FL

Zip Code
32257

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 *Freddie Rowland*

(NOTE: Registered Agent signature required when reinstating)

8/1/01

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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
D
ROWLAND, FREDDIE
4231 WALNUT BEND #3
JACKSONVILLE FL 32257

☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP
D
ROWLAND, PAULA
4231 WALNUT BEND #3
JACKSONVILLE FL 32257

☐ Delete

TITLE
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STREET ADDRESS
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☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP
☐ 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:

Freddie Rowland
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-28-01

Date

Daytime Phone #

CR2034 (5/01)