

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000001170

1. Entity Name  
THE MATRIX BUILDERS GROUP, INC.

*Amended*  
10/10/01

01 OCT 15 PM 4:09

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
1550 ORANGE BLOSSOM TRAIL NE 1550 ORANGE BLOSSOM TRAIL NE  
PALM BAY FL 32905 PALM BAY FL 32905

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 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

~~Jack R. Gilbert~~ *Dan Swenson*  
1550 Orange Blossom Tr.  
Palm Bay, FL 32905

Name *Jack R Gilbert*  
Street Address (P.O. Box Number is Not Acceptable)  
*1550 Orange Blossom Tr*  
City *Palm Bay* FL Zip Code *32905*

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 *Jack R Gilbert* (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 ☒ Delete  
NAME SWENSON, DANIEL E  
STREET ADDRESS 1550 ORANGE BLOSSOM TRAIL NE  
CITY-ST-ZIP PALM BAY FL 32905

TITLE ☐ Change ☐ Addition  
NAME 700004669787-9  
STREET ADDRESS -11/06/01--01084--024  
CITY-ST-ZIP \*\*\*\*\*61.25 \*\*\*\*\*61.25

TITLE ☐ Delete  
NAME GILBERT, JACK R  
STREET ADDRESS 1550 ORANGE BLOSSOM TRAIL NE  
CITY-ST-ZIP PALM BAY FL 32905

TITLE ☐ Change ☐ Addition  
NAME Pres, Sec, Tres  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME V-P  
STREET ADDRESS William Thompson  
CITY-ST-ZIP 1550 Orange Blossom  
PALM BAY, FL 32905

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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.

10/8/01 721-95168848