

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2002 8:00 am
Secretary of State

09-10-2002 90236 018 ***150.00

DOCUMENT # P01000073336

1. Entity Name

TRAINING EVALUATION AND MANAGEMENT TECHNOLOGIES, INC.

Principal Place of Business

**1980 RUE LA FONTAINE
 NAVARRE FL 32566**

Mailing Address

**1980 RUE LA FONTAINE
 NAVARRE FL 32566**

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

59-3738279

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

**BARADON, LINDA J
 1980 RUE LA FONTAINE
 NAVARRE FL 32566**

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, 2002 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 **D** ☐ Delete
 NAME **BARADON, LINDA J**
 STREET ADDRESS **1980 RUE LA FONTAINE**
 CITY-ST-ZIP **NAVARRE FL 32566**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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 Linda J Baradon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

x 9/5/02
 Date

x (813) 745-7774
 Daytime Phone #

CR2E034 (9/01)

Attachment

Pol 00007333

September 6, 2002

1980 Rue La Fontaine
Navarre, FL 32566

Florida Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I called the Division of Corporations this morning and spoke with Esther regarding the notice that I received in the mail this week. She advised me to submit the Uniform Business Report (UBR) form immediately (enclosed) and that the penalty would be waived for CY 2002. Enclosed please find a check for \$150 for the CY 2002 corporate fees. Future fees will be paid upon receipt of UBR notice. Thank you for your consideration in this matter.

Sincerely,

Linda J. Brent Baradon

Linda J. Brent Baradon
President
Training, Evaluation and Management
Technologies, Inc.

Encl

1. UBR
2. Check #4170