

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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

05-10-2002 90012 041 ***150.00

DOCUMENT # P01000090533

1 of 2

1. Entity Name

INCEPTURE, INC.

DO NOT WRITE IN THIS SPACE

80093510

2. Principal Place of Business
532 Riverside Avenue

3. Mailing Address
532 Riverside Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Jacksonville FL

City & State
Jacksonville FL

4. FEI Number

59-3720231

Applied For

Not Applicable

Zip
32202

Country
Duval

Zip
32202

Country
Duval

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Mark S. McGowan

Street Address (P.O. Box Number is Not Acceptable)

4800 Deerwood Campus Pkwy., 100-7

City
Jacksonville

FL

Zip Code
32246

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
STREET ADDRESS
CITY-ST-ZIP
C
R. Chris Doerr
4800 Deerwood Campus Pkwy., 100-8
Jacksonville FL 32246-8773

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Donald M. Hardeman
8381 Dix Ellis Trail, Suite 105
Jacksonville FL 32256

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Charles S. Joseph
4800 Deerwood Campus Pkwy., 100-7
Jacksonville FL 32246

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Deanna M. McDonald
4800 Deerwood Campus Pkwy., 100-6
Jacksonville FL 32246

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Barry O'Reilly
4800 Deerwood Campus Pkwy., 600-3
Jacksonville FL 32246

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
Mark S. McGowan
4800 Deerwood Campus Pkwy., 100-7
Jacksonville FL 32246

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mark S. McGowan

Mark S. McGowan

4-29-2002

904-905-6570

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

Attachment
B0093510

DOCUMENT # P01000090533

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Not Applicable

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City Jacksonville FL Zip Code 32246

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Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
T
Scott Froyen
532 Riverside Avenue, 20T
Jacksonville FL 32202

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P/CEO
Curtis W. Lord
532 Riverside Avenue, 20T
Jacksonville FL 32202

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
Robert J. Wright
532 Riverside Avenue, 20T
Jacksonville, FL 32202

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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SIGNATURE:

Mark S. McGowan

Mark S. McGowan

4-29-2002 904-905-6570

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)