

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

04-17-2002 90045 033 ***150.00

DOCUMENT # P01000116253

1. Entity Name

SPECTRA CONSULTING, INC.

Principal Place of Business

9300 OVERSEAS HWY.
MARATHON FL 33050

Mailing Address

9300 OVERSEAS HWY.
MARATHON FL 33050

87304



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

140 SOUTH MAIN STREET

Suite, Apt. #, etc.

3. Mailing Address

140 SOUTH MAIN STREET

Suite, Apt. #, etc.

City & State

BROOKSVILLE, FLORIDA

Zip

34601

Country

USA

City & State

BROOKSVILLE, FLORIDA

Zip

34601

Country

USA

4. FEI Number

65-1159117

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

MOSHER, GEOFFREY K JR
140 S. MAIN ST.
BROOKSVILLE FL 34601

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, 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

TITLE ☐ Delete
 NAME **P**
 STREET ADDRESS **CARTER, JANE E**
 CITY-ST-ZIP **9300 OVERSEAS HWY.
MARATHON FL 33050**

TITLE ☐ Delete
 NAME **V**
 STREET ADDRESS **CARTER, ROBERT**
 CITY-ST-ZIP **9300 OVERSEAS HWY.
MARATHON FL 33050**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **140 SOUTH MAIN STREET**
 CITY-ST-ZIP **BROOKSVILLE, FLORIDA 34601**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **140 SOUTH MAIN STREET**
 CITY-ST-ZIP **BROOKSVILLE, FLORIDA 34601**

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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.

SIGNATURE:

Robert Carter
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/31/02
 Date

Daytime Phone #

CR2E034 (9/01)