

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000004389

1. Entity Name

DECISION SUPPORT TECHNOLOGIES, INC.

**FILED**  
**Feb 28, 2000 8:00 am**  
**Secretary of State**

02-28-2000 90073 029 \*\*\*150.00

Principal Place of Business  
6751 FORUM DR  
240 A  
ORLANDO FL 32821

Mailing Address  
6751 FORUM DR  
240 A  
ORLANDO FL 32821-8086  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
6750 Forum Drive  
Suite, Apt. #, etc.  
Suite 304  
City & State  
Orlando, FL  
Zip  
32821  
Country  
USA

3. Mailing Address  
same  
Suite, Apt. #, etc.  
City & State  
City & State  
Zip  
32821  
Country  
USA

4. FEI Number 59-3213530  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
HILLMAN-WALLER, LOUIS M ESQ.  
OCEAN BANK BLDG., STE 350  
782 LEJEUNE RD  
MIAMI FL 33126

7. Name and Address of New Registered Agent  
Name  
Ronald F. Birk  
Street Address (P.O. Box Number is Not Acceptable)  
6750 Forum Drive, Suite 304  
City  
Orlando FL Zip Code  
32821

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 Ronald F. Birk, Director 1/1/2000  
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, 2000 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	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	BIRK, RONALD F L	3909 LITHIA RIDGE BLVD.	VALRICO FL 33594	<input type="checkbox"/>
D	STRANGE, STERLING T III	7147 NORWICH CT	WARRENTON VA	<input type="checkbox"/>
D	PORTER, GLENDON R.	405 S. KARPPE RD	PLANT CITY FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Glendon R. Porter 2/18/2000 407-370-4664  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Exec. V.P. Date Daytime Phone #

CR2E034 (9/99)