

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2001 8:00 am
Secretary of State
 05-01-2001 90055 012 ***150.00

DOCUMENT # **P93000081018**

1. Entity Name
CTG OPERATIONS, INC.

Principal Place of Business Mailing Address
530 FENTRESS BLVD. **530 FENTRESS BLVD.**
DAYTONA BEACH FL 32114 **DAYTONA BEACH FL 32114**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **38-3148154**

Application Fee
 Not Applicable

Zip Country Zip Country

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

PALMETTO CHARTER SERVICES INC.
150 MAGNOLIA AVE.
DAYTONA BEACH FL 32115-2491

Name
 Street Address (P.O. Box Numbers Not Acceptable)
 City State 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 sign application (NOTE: Registered Agent's signature records when submitted) (SAS)

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 2001

11. OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 2001
TITLE: DCEO <input type="checkbox"/> Delete NAME: EZZELL, EUGENE E STREET ADDRESS: 530 FENTRESS BLVD. CITY-STATE-ZIP: DAYTONA BEACH FL	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Add NAME: <input type="checkbox"/> Change <input type="checkbox"/> Add STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Add CITY-STATE-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE: VPST <input type="checkbox"/> Delete NAME: BURGESS, DENNIS P STREET ADDRESS: 530 FENTRESS BLVD CITY-STATE-ZIP: DAYTONA BEACH FL 32114	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Add NAME: <input type="checkbox"/> Change <input type="checkbox"/> Add STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Add CITY-STATE-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Add
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 employment.

SIGNATURE:

Eugene E. Ezzell 1/9/01 (904) 252-1151

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR12L004 (10-00)