

Jan 14 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000066072 (7)

1. Corporation Name:

OPENNET TECHNOLOGIES, INC.

Principal Place of Business

2262 GLENMOORE ROAD NORTH
CLEARWATER FL 34624

Mailing Address

2262 GLENMOORE ROAD NORTH
CLEARWATER FL 34624-49203. Date Incorporated or Qualified
09/08/19943a. Date of Last Report
05/01/1996

4. FEI Number

59-3281893

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 121 N. OSCEOLA AVE

2a. Mailing Address

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 500

Suite, Apt. #, etc.

City & State

23 CLEARWATER FL

City & State

28 Zip Country

Zip

24 34615

Country

25 PINELLAS

Zip

29

Country

30

9. Name and Address of Current Registered Agent

LONG, KURT
2262 GLENMOOR RD N
CLEARWATER FL 33134

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETENAME LONG, KURT J
STREET ADDRESS 2262 GLENMOORE ROAD NORTH
CITY-ST-ZIP CLEARWATER FL 34624TITLE ☐ 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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE T ☐ Change ☒ Addition

1.2 NAME JEFF PARKS

1.3 STREET ADDRESS 1430 FOREST RD

1.4 CITY-ST-ZIP CLEARWATER FL 34615

2.1 TITLE S ☐ Change ☒ Addition

2.2 NAME ROBERT WORNER

2.3 STREET ADDRESS 3099 HILLSIDE LN.

2.4 CITY-ST-ZIP SAFETY HARBOR FL 34695

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEFF PARKS Treasurer

Date

1/6/97

Daytime Phone #

813-298-0192

CR2E034 (9/96)