2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State
03-01-2001 91322 029 ***150.00

DOCUMENT # P94000082454

1. Entity Name
TECHNICAL ANSWER GROUP, INC.

Principal Place of Business	Mailing Address
1401 JOHNSON FERRY RD. 328-346 MARIETTA GA 30062-8115 US	1401 JOHNSON FERRY RD. 328-E46 MARIETTA GA 30062-8115 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
736 JOHNSON FERRY Rd	736 JOHNSON FERRY Rd
Suite, Apt. #, etc. SUITE 230	Suite, Apt. #, etc. SUITE 230
City & State MARIETTA, GA	City & State MARIETTA GA
Zip 30068 Country USA	Zip 30068 Country USA

4. FEI Number 59-3275853 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MCILRATH, JAMES W.
3510 1ST AVENUE, N.
STE 224
ST. PETERSBURG FL 33713

7. Name and Address of New Registered Agent

Name Mc ILRATH, JAMES
Street Address (P.O. Box Number is Not Acceptable) 7941 BOGIE AV N
ST PETERSBURG
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, 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 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARPENTER, RICHARD 1401 JOHNSON FERRY RD., 328-E46 MARIETTA GA ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT RICHARD CARPENTER 736 JOHNSON FERRY Rd #230 MARIETTA, GA 30068 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCILRATH, JAMES 7941 BOGIE AVE. N. ST. PETERSBURG FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/00)

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: [signature] RICHARD CARPENTER 2-23-01 770 565-8445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #