

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000046765

1. Entity Name

INOVIDEA, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90071 049 ***150.00

Principal Place of Business

Mailing Address

3917 40TH ST W
BRADENTON FL 34205-319
US

3917 40TH ST W
BRADENTON FL 34203-7305
US

2. Principal Place of Business

3819 GARDEN LAKES TER

3. Mailing Address

3819 GARDEN LAKES TER

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BRADENTON FL

City & State

BRADENTON FL

4. FEI Number

65-0595086

Applied For

Not Applicable

Zip

34203-7305

Country

USA

Zip

34203-7305

Country

USA

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

AMON, SALLY L
3917 40TH ST. W
BRADENTON FL 34205-2319

Name

AMON, SALLY L

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

3819 GARDEN LAKES TERRACE

City

BRADENTON

FL

Zip Code

34203 -

7305

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

Sally L. Amon, Pres

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

(NOTE: Registered Agent signature required when reinstating)

4/25/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MILLER, THELMA J
6111 RIVERVIEW BLVD
BRADENTON FL 34209-1344

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
P
AMON, SALLY L
3917 40TH ST W
BRADENTON FL 34205-2319

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
P
AMON, SALLY L
3819 GARDEN LAKES TERRACE
BRADENTON FL 34203-7305

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
AMON, KEITH
3917 40TH ST W
BRADENTON FL 34205-2319

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
AMON, KEITH H
3819 GARDEN LAKES TERRACE
BRADENTON FL 34203-7305

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Keith A. Amon, S/T
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 25, 00

Date

941-
751-9924
Daytime Phone #

CR2E034 (9/99)