

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000048157

1. Entity Name

TECHNICAL RESEARCH GROUP, INC.

**FILED**  
**Jan 25, 2000 8:00 am**  
**Secretary of State**

01-25-2000 90032 012 \*\*\*150.00

Principal Place of Business

8499 S. TAMiami TRAIL. STE. 221  
SARASOTA FL 34238

Mailing Address

8499 S. TAMiami TRAIL. STE. 221  
SARASOTA FL 34238-2960

2. Principal Place of Business

4022 COUNTRYVIEW RD

3. Mailing Address

4022 COUNTRYVIEW RD

Suite, Apt. #, etc.

SARASOTA, FLA

Suite, Apt. #, etc.

SARASOTA FLA

City & State

City & State

4. FEI Number

65-0596982

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MYERS, JOHN H  
27 FLETCHER AVE.  
SARASOTA FL 34237

7. Name and Address of New Registered Agent

Name

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

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 HARRY G. BRUNKEN

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-18-00

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 ☐ Delete  
NAME **P BRUNKEN, HARRY G**  
STREET ADDRESS **4022 COUNTRY VIEW DR**  
CITY-ST-ZIP **SARASOTA FL 34233**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Delete  
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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: HARRY G. BRUNKEN  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-00

Date

Daytime Phone #

941-927-3370

CR2E034 (9/99)