

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000000127

1. Entity Name

ORLANDO SOFTWARE GROUP, INC.

FILED

Feb 09, 2001 8:00 am
Secretary of State

02-09-2001 90242 045 ***150.00

Principal Place of Business

2705 TALLY HO AVE
ORLANDO FL 32826

Mailing Address

2705 TALLY HO AVE
ORLANDO FL 32826

2. Principal Place of Business

14860 Hartford Run Dr

3. Mailing Address

Suite, Apt. #, etc.

City & State

Orlando FL

City & State

SAME AS
Principal Place
of Business

Zip

32828

Country

US

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3350317

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SADLOWSKY, KARL
2705 TALLY HO AVENUE
ORLANDO FL 32826

7. Name and Address of New Registered Agent

Name

Karl J. Sadowsky

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

14860 Hartford Run Drive

City

Orlando

FL

Zip Code

32828

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

Karl J. Sadowsky

2/6/01

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

TITLE	D	<input type="checkbox"/> Delete
NAME	SADLOWSKY, KARL J	
STREET ADDRESS	2705 TALLY HO AVENUE	
CITY-ST-ZIP	ORLANDO FL 32826	
TITLE	D	<input type="checkbox"/> Delete
NAME	HEGWOOD, TIMOTHY L	
STREET ADDRESS	1060 MEADOW LAKE WAY APT #203	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE	D	<input type="checkbox"/> Delete
NAME	DUFFENDACK, ARTHUR S	
STREET ADDRESS	2311 PALM WAY	
CITY-ST-ZIP	SANFORD FL 32773	
TITLE	D	<input type="checkbox"/> Delete
NAME	RAITANO, ANTHONY J	
STREET ADDRESS	3637 ROTHBURY DR	
CITY-ST-ZIP	ORLANDO FL 32812	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	14860 Hartford Run Drive	
STREET ADDRESS	Orlando, FL 32828	
CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/01

Date

407 402 0391

Daytime Phone #

CR2E0(A101000)