

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2001 8:00 am
Secretary of State

03-28-2001 90202 039 ***150.00

DOCUMENT # P96000029585

1. Entity Name

EXCEL COMPUTER COMPANY, INC.

Principal Place of Business

**2400 15TH AVE
VERO BEACH FL 32960
US**

Mailing Address

**2400 15TH AVE
VERO BEACH FL 32960
US**

2. Principal Place of Business

1131 7th Avenue

Suite, Apt. #, etc.

3. Mailing Address

1131 7th Avenue

Suite, Apt. #, etc.

City & State

Vero Beach, FL

City & State

Vero Beach, FL

Zip

32960

Country

USA

Zip

32960

Country

USA

4. FEI Number

65-0658996

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SEGAL, BARRY G PA
2027 INDIAN RIVER BLVD
SUITE 1
VERO BEACH FL 32960**

7. Name and Address of New Registered Agent

Name

Segal, Barry G. PA

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

2801 Ocean Drive

Suite 304

City

Vero Beach

FL

Zip Code

32963

8. The above named entity submits this statement for the purpose of changing the registered office or registered agent, or both, in the State of Florida.

SIGNATURE **Barry G. Segal PA**

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

Not Applicable (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 **P** ☐ Delete
NAME **ANDREWS, JOSEPH T JR.**
STREET ADDRESS **2400 15TH AVE**
CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE ☒ Change ☐ Addition
NAME **1131 7th Avenue**
STREET ADDRESS **Vero Beach, FL 32960**
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **ANDREWS, SHEILA**
STREET ADDRESS **2400 15TH AVE**
CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE ☒ Change ☐ Addition
NAME **1131 7th Avenue**
STREET ADDRESS **Vero Beach, FL 32960**
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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0085218