

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000033339

1. Entity Name

SUNBELT SOFTWARE, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90456 028 ***158.75

Principal Place of Business

111 WINTER CLUB COURT
PALM BEACH GARDENS FL 33410

Mailing Address

111 WINTER CLUB COURT
PALM BEACH GARDENS FL 33458-8338

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

216 Anhinga Ln

City & State

Jupiter FL

Suite, Apt. #, etc.

216 Anhinga Ln

City & State

Jupiter FL

Zip

33458-8338

Country

Zip

33458-8338

Country

4. FEI Number

65-0694605

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RICHARDSON, KEVIN F ESQ
CLYATT & RICHARDSON, P.A.
1551 FORUM PLACE - #300-C
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name

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

Suite #300-F

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, 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 PD
NAME SCHREIBER, MARC C
STREET ADDRESS 111 WINTER CLUB COURT
CITY-ST-ZIP PALM BEACH GARDENS FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME 216 Anhinga Ln
STREET ADDRESS Jupiter FL
CITY-ST-ZIP 33458-8338

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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:

MARC SCHREIBER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/00 561 741 0252

CR2E034 (9/99)