

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000041750

1. Entity Name

ARDENT CONSULTANTS INCORPORATED

Principal Place of Business

538 FRIAR ROAD  
WINTER PARK FL 32792  
US

Mailing Address

P.O. BOX 2022  
WINTER PARK FL 32790-2022  
US

2. Principal Place of Business

538 Whippoorwill LN

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Oviedo FL

City & State

City & State

Zip

32765

Country

USA

Zip

Zip

Country

Country

4. FEI Number

59-3382877

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ST. PIERRE, DANIEL A  
538 FRIAR ROAD  
WINTER PARK FL 32792

7. Name and Address of New Registered Agent

Name DANIEL A. ST. PIERRE

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

538 Whippoorwill LN

City

Oviedo

FL

Zip Code

32765

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

DANIEL A. ST. PIERRE

(NOTE: Registered Agent signature required when reinstating)

DATE

1-5-00

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 POST  
NAME ST. PIERRE, DANIEL A  
STREET ADDRESS 538 FRIAR RD  
CITY-ST-ZIP WINTER PARK FL 32792 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDST  
NAME DANIEL A. ST. PIERRE ☒ Change ☐ Addition  
STREET ADDRESS 538 Whippoorwill LN  
CITY-ST-ZIP Oviedo FL 32765

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

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

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

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

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:

DANIEL A. ST. PIERRE

Date

Daytime Phone #

1-5-00

407 679-2559