

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000054407

1. Entity Name
TDC CONSULTING, INC.

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90146 038 ***550.00

Principal Place of Business
2001 PARK AVE N
WINTER PARK FL 32789

Mailing Address
2001 PARK AVE N
WINTER PARK FL 32789

2. Principal Place of Business
5102 Belmore Pkwy

3. Mailing Address
5102 Belmore Pkwy

Suite, Apt. #, etc.
#1601

Suite, Apt. #, etc.
#1601

City & State
Tampa, FL

City & State
Tampa, FL

Zip
33624

Country
US

Zip
33624

Country
US



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3390060

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COOK, TOMOTHY D
2001 PARK AVE N
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name Timothy D. Cook
Street Address (P.O. Box Number is Not Acceptable)
5102 Belmore Pkwy #1601
City Tampa FL Zip 33624

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 S & C

9/12/00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
NAME COOK, TIMOTHY D
STREET ADDRESS 2001 PARK AVE N
CITY-ST-ZIP WINTER PARK FL 32789 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME Timothy D. Cook
STREET ADDRESS 5102 Belmore Pkwy #1601
CITY-ST-ZIP Tampa FL 33624 ☒ 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

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/12/00
Date

(813) 961-1361
Daytime Phone #

CR2E034 (5/00)