

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000055071

1. Entity Name

INFLOW MANAGEMENT GROUP, INC.

FILED
Feb 02, 2000 8:00 am
Secretary of State

02-02-2000 90127 011 ***150.00

Principal Place of Business

9250 CYPRESS GREEN DR
JACKSONVILLE FL 32256
US

Mailing Address

9250 CYPRESS GREEN DRIVE STE 102
JACKSONVILLE FL 32256-7798

2. Principal Place of Business

11319 Portside Drive

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 350880

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Jacksonville FL

City & State

Jacksonville Florida

4. FEI Number

59-3391406

Applied For

Not Applicable

Zip

32225

Country

US

Zip

32235-0880

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Hall, Debra C.

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

11319 Portside Drive

City

Jacksonville

FL

Zip Code

32225

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME HALL, DEBRA C
STREET ADDRESS 9250 CYPRESS GREEN DRIVE STE 102
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE D ☒ Change ☐ Addition
NAME Hall, Debra C
STREET ADDRESS 11319 Portside Drive
CITY-ST-ZIP Jacksonville FL 32225

TITLE D ☐ Delete
NAME HALL, RONALD K
STREET ADDRESS 9250 CYPRESS GREEN DRIVE STE 102
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE D ☒ Change ☐ Addition
NAME Hall, Ronald K.
STREET ADDRESS 11319 Portside Drive
CITY-ST-ZIP Jacksonville FL 32225

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
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STREET ADDRESS
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TITLE ☐ Delete
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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: R. Keith Hall
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/00
Date

904-737-9417
Daytime Phone #

CR2E034 (9/99)