

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90143 015 ***150.00

DOCUMENT # P96000101389

1. Entity Name

INTERNETWORK INTEGRATION, INC.

Principal Place of Business

208 LYNDHURST CT
 LONGWOOD FL 32779
 US

Mailing Address

208 LYNDHURST CT
 LONGWOOD FL 32779-4574
 US

2. Principal Place of Business

310 FULTON INDUSTRIAL CIR
 Suite, Apt. #, etc.

3. Mailing Address

310 FULTON INDUSTRIAL CIR
 Suite, Apt. #, etc.

City & State
ATLANTA, GA

Zip
30336

Country
USA

City & State
ATLANTA, GA

Zip
30336

Country
USA

4. FEI Number **59-3410665**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

LUDINGTON, JAMES P
208 LYNDHURST CT
LONGWOOD FL 32779

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 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 ☐ Delete
 NAME **PSD**
 STREET ADDRESS **LUDINGTON, JAMES P**
 CITY-ST-ZIP **208 LYNDHURST CT**
LONGWOOD FL 32779

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **SHEWCHUK, BAILEY**
 CITY-ST-ZIP **SCIOTO CT**
DULUTH GA 30348

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☒ Change ☐ Addition
 NAME **V/D**
 STREET ADDRESS **SHEWCHUK, BAILEY M**
 CITY-ST-ZIP **1203 BROAD ST**
BELLINGHAM, WA 98226

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **MALLOW, ROBERT**
 CITY-ST-ZIP **12506 SLATER**
OVERLAND PARK, KS 66213

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

TITLE ☐ Change ☐ Addition
 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 #

JAMES P. LUDINGTON **4/24/00** **(404) 699-1199**

CR2E034 (9/99)