

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000007648

1. Entity Name

CROSSROADS TECHNICAL GROUP INC.

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90088 030 ***158.75

Principal Place of Business

Mailing Address

600 CLEVELAND ST.
760
CLEARWATER FL 33755

412 HARBOR VIEW LANE
LARGO FL 33770-4009
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-4340101

Applied For

Not Applicable

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

GILLIAM, PHILLIP P.
412 HARBORVIEW LANE
LARGO FL 33770

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

PHILLIP P. GILLIAM

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/21/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PCEO
NAME GILLIAM, PHILLIP
STREET ADDRESS 412 HARBORVIEW LANE
CITY-ST-ZIP LARGO FL 33770

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE C
NAME RINEY, TIMOTHY
STREET ADDRESS 1812 WEATHERSTONE DRIVE
CITY-ST-ZIP SAFETY HARBOR FL 34695

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VP
NAME RICKARD, BRUCE
STREET ADDRESS 7935 CAUSEWAY BLVD N.
CITY-ST-ZIP ST. PETERSBURG FL 33707

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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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:

PHILLIP P. GILLIAM
PRESIDENT/CEO

4/21/00 (727) 466-9220

Date

Daytime Phone #

CR2E034 (9/99)