2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2000 8:00 am
Secretary of State
02-08-2000 90048 032 ***150.00

DOCUMENT # P97000014079

1. Entity Name

THE LISTENER GROUP, INC.

Principal Place of Business	Mailing Address
1163 GULF BREEZE PKWY GULF BREEZE FL 32561	1163 GULF BREEZE PKWY GULF BREEZE FL 32561-4835

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P O Box 1416 Suite, Apt. #, etc.
City & State	City & State: Gulf Breeze FL 32562
Zip / Country	Zip: 32562 / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3432146 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SMITH, ROBERT W
1157 GULF BREEZE PKWY
GULF BREEZE FL 32561

7. Name and Address of New Registered Agent

Name: David W Lytell
Street Address (P.O. Box Number is Not Acceptable): 6803 Kitty Hawk Dr
City: Pensacola **FL** Zip Code: 32506

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 Added to Fee

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SMITH, ROBERT W 2704 GLEN OAK CR GULF BREEZE FL 32561	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D David W Lytell 6803 Kitty Hawk Dr Pensacola FL 32506	☐ Change ☐ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Mr. H. Wade German PhD 12823 Dewey Street Omaha NE 68154	☐ Change ☒ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Beryl L Miller 3911 McClellan Rd Pensacola FL 32503	☐ Change ☒ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Prentice Robinson P O Box 6394 Gulf Breeze FL 32562	☐ Change ☒ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Mr Douglas Richards 5655 North 9th Av P106 Pensacola FL 32504	☐ Change ☒ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Mr. Dale.C Williams 1844 Semur Rd Pensacola FL 32503	☐ Change ☒ Add

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 2/7/00 850-934-9
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #