

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000039316

1. Entity Name

TELECOM RESPONSE, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90173 013 ***150.00

Principal Place of Business

5414 W. CRENSHAW STREET
TAMPA FL 33634

Mailing Address

5414 W. CRENSHAW STREET
TAMPA FL 33634-3009

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 59-3443917

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

BROWN, W. KRIS
1 NORTH DALE MABRY HIGHWAY
SUITE 850
TAMPA FL 33609

Name **BROWN, W. KRIS**
Street Address (P.O. Box Number is Not Acceptable) **5414 W. Crenshaw street**
City **Tampa** FL **33634**

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 Rebecca O'Keefe Rebecca O'Keefe Corp. Secretary 4/30/00
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 \$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 ☐ Delete
NAME **DP**
STREET ADDRESS **BROWN, W KRIS**
CITY-ST-ZIP **12910 CINNAMON PL**
TAMPA FL

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

TITLE ☒ Delete
NAME **DVP**
STREET ADDRESS **CEREZO, JONATHAN C**
CITY-ST-ZIP **15111 NATURE WALK DRIVE**
TAMPA FL 33624

TITLE ☐ Change ☒ Addition
NAME **Director**
STREET ADDRESS **CHUCK WILLIAMS**
CITY-ST-ZIP **18860 US HWY #124**
CLEARWATER, FL 33764

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **WADE, GARY**
CITY-ST-ZIP **5528 BRADFORD CT**
ORANGE PARK FL 32073

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

TITLE ☐ Delete
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TITLE ☐ Delete
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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: Rebecca O'Keefe Rebecca O'Keefe Corporate Secretary 4/30/00 813 886 6200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)