

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000049971

1. Entity Name

TESSERA GULFSTREAM, INC.

FILED
May 11, 2000 8:00 am
Secretary of State

05-11-2000 90298 014 ***158.75

Principal Place of Business

Mailing Address

201 GULF OF MEXICO DR., STE. 6
LONGBOAT KEY FL 34228

201 GULF OF MEXICO DR., STE. 6
LONGBOAT KEY FL 34228-4022

2. Principal Place of Business

303 PALM AVENUE

3. Mailing Address

7800 BAYBERRY ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA, FL

City & State

JACKSONVILLE, FL

4. FEI Number

65-0763167

Applied For

Not Applicable

Zip

34236

Country

USA

Zip

32256

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CLABAUGH, JAMES E
201 GULF OF MEXICO DR., STE. 6
LONGBOAT KEY FL 34228

7. Name and Address of New Registered Agent

Name

DAVID GURLEY

Street

NORTON, GURLEY HAMMERSLEY, & LOPEZ

1819 MAIN STREET, SUITE 610

City

SARASOTA

FL

Zip Code
34236

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

4/25/00

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

TITLE PD
NAME CLABAUGH, JAMES E
STREET ADDRESS 201 GULF OF MEXICO CR., #6
CITY-ST-ZIP LONGBOAT KEY FL 34228 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME CLABAUGH, JAMES E
STREET ADDRESS 303 PALM AVENUE
CITY-ST-ZIP SARASOTA, FL 34236

TITLE DVAS ☐ Change ☒ Addition
NAME FULLERTON, ROBERT C.
STREET ADDRESS 7800 BAYBERRY ROAD
CITY-ST-ZIP JACKSONVILLE, FL 32256

TITLE VS ☐ Change ☒ Addition
NAME GIBSON, CHRISTINE
STREET ADDRESS 303 PALM AVENUE
CITY-ST-ZIP SARASOTA, FL 34236

TITLE V ☐ Change ☒ Addition
NAME McCULLOUGH, PAMELA
STREET ADDRESS 303 PALM AVENUE
CITY-ST-ZIP SARASOTA, FL 34236

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

TITLE
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/15/00

904 737 8500

CR2E034 (9/99)