

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000061891 (2)

1. Corporation Name

NEW TECHNOLOGY CENTRE, INC.

Principal Place of Business

201 SOUTH ORANGE AVE. #1010
ORLANDO FL 32801

Mailing Address

201 SOUTH ORANGE AVE. #1010
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/16/1997

4. FEI Number

59-3455155

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

21 20 N. Orange Ave

Suite, Apt. #, etc.

22 #1400

City & State

23 ORLANDO

Zip

24 32801

Country

25 ORANGE

2a. Mailing Address

26 20 N. ORANGE AVE

Suite, Apt. #, etc.

27 #1400

City & State

28 ORLANDO

Zip

29 32801

Country

30 ORANGE

9. Name and Address of Current Registered Agent

VAN ORDEN, KRISTOPHER
201 SOUTH ORANGE AVE. #1010
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name

McCue, Carole

82 Street Address (P.O. Box Number is Not Acceptable)

20 N. ORANGE AVE

83

84 City

ORLANDO

FL

85 Zip Code

32801

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Carole McCue

Signature, typed or printed in ink, of registered agent and filed as appropriate

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME VAN ORDEN, KRISTOPHER
STREET ADDRESS 616 SUMMERLIN AVE.
CITY-ST-ZIP ORLANDO FL 32801

TITLE ☒ DELETE

NAME VAN ORDEN, WAYNE
STREET ADDRESS 616 SUMMERLIN AVE.
CITY-ST-ZIP ORLANDO FL 32801

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME McCue, Carole
1.3 STREET ADDRESS 230 S. Ridgewood Ave
1.4 CITY-ST-ZIP ORLANDO BEACH, FL 32174

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Carole McCue

CR2E034 (10/97)