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2001 UNIFORM BUSINESS REPORT (UBR)

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

Feb 19, 2001 8:00 am DOCUMENT # P97000068363 Secretary of State THE DETTMER CONSULTING GROUP, INC. 02-19-2001 90043 038 ***150.00 Principal Place of Business Mailing Address 4404 CYPRESS CREEK DRIVE 4404 CYPRESS CREEK DRIVE PONTE VEDRA BEACH FL 32082 PONTE VEDRA BEACH FL 32082 718113 2. Principal Place of Business 3. Mailing Address 830 - 13 AIA NORTH Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 114 Applied For City & State City & State 4. FEI Number 59-3466099 PONTE VEDRA BEACH, FL Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired USA 32082 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent AMERILAWYER CHARTERED Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE **CORAL GABLES FL 33134** Zip Code City FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition CR2E034 (10/00) [] Change TITLE ☐ Delete TITLE DETTMER, MAURICE L NAME NAME 4404 CYPRESS CREEK DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP Change ☐ Delete TITLE Addition DETTMER, JOANNE L NAME NAME 4404 CYPRESS CREEK DRIVE STREET ADDRESS STREET ADDRESS PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP CITY-ST-ZIP TITLE -Delete ☐ Change Addition -TITLE DETTMER, JASON L NAME NAME 4404 CYPRESS CREEK DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIF PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP [] Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP [] Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 eath; 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