

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 18, 2002 8:00 am**  
**Secretary of State**

0115397 AV

**DOCUMENT # P97000085703**

**1. Entity Name**  
**SOLUNET HOLDING COMPANY, INC.**

02-18-2002 90083 001 \*\*\*300.00

**Principal Place of Business**      **Mailing Address**  
**1571 ROBERT J. CONLAN BLVD., STE. 110**      **1571 ROBERT J. CONLAN BLVD., STE. 110**  
**PALM BAY FL 32905**      **PALM BAY FL 32905**

13394



**2. Principal Place of Business**      **3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number**      **91-1878504**

**Applied For**  
**Not Applicable**

Zip

Country

Zip

Country

**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**

**ERICKSON, HARRY V**  
**1571 ROBERT J. CONLAN BLVD.**  
**SUITE 110**  
**PALM BAY FL 32905**

Name

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

City

**FL**

Zip Code

**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

**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, 2002 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**      **S**      ☒ **Delete**  
**NAME**      **CHAMBERLAND, ROGER R**  
**STREET ADDRESS**      **1571 ROBERT J CONLAN BLVD**  
**CITY-ST-ZIP**      **PALM BAY FL 32905**

**TITLE**      **VP Operations + Tech Sec**      ☐ **Change**      ☒ **Addition**  
**NAME**      **James Griffin**  
**STREET ADDRESS**      **1571 Robert J. Conlan Blvd**  
**CITY-ST-ZIP**      **Palm Bay, FL 32905**

**TITLE**      **DCFO**      ☐ **Delete**  
**NAME**      **ERICSON, HARRY**  
**STREET ADDRESS**      **1571 ROBERT J CONLAN BLVD #110**  
**CITY-ST-ZIP**      **PALM BAY FL 32905**

**TITLE**      **Director**      ☐ **Change**      ☒ **Addition**  
**NAME**      **Ronald Borelli**  
**STREET ADDRESS**      **1571 Robert J Conlan Blvd**  
**CITY-ST-ZIP**      **Palm Bay, FL 32905**

**TITLE**      **P Wertheimer**      ☐ **Delete**  
**NAME**      **WERTHEIMER, MICHAEL**  
**STREET ADDRESS**      **1571 ROBERT J CONLAN BLVD**  
**CITY-ST-ZIP**      **PALM BAY FL 32905**

**TITLE**      **Director**      ☐ **Change**      ☒ **Addition**  
**NAME**      **George Dannecker**  
**STREET ADDRESS**      **1571 Robert J. Conlan Blvd**  
**CITY-ST-ZIP**      **Palm Bay, FL 32905**

**TITLE**      **D**      ☒ **Delete**  
**NAME**      **BENSON, STEVEN**  
**STREET ADDRESS**      **1571 ROBERT J CONLAN BLVD #110**  
**CITY-ST-ZIP**      **PALM BAY FL 32905**

**TITLE**      **Techio Priano Director**      ☐ **Change**      ☒ **Addition**  
**NAME**      **Techio Priano**  
**STREET ADDRESS**      **1571 Robert J Conlan Blvd**  
**CITY-ST-ZIP**      **Palm Bay, FL 32905**

**TITLE**      **T**      ☐ **Delete**  
**NAME**      **WETZEL, NORM**  
**STREET ADDRESS**      **1571 ROBERT J CONLAN BLVD**  
**CITY-ST-ZIP**      **PALM BAY FL 32905**

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

**TITLE**      **VP Saks**      ☐ **Delete**      **Add**  
**NAME**      **James Mann**  
**STREET ADDRESS**      **1571 Robert J Conlan Blvd**  
**CITY-ST-ZIP**      **Palm Bay FL 32905**

**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:**

*Norman W. Wetzel*      **NORMAN W. WETZEL**      **1/23/02**      **321-676-7947**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/01)