

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000013230

1. Entity Name

METATEXT, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90067 020 ***150.00

Principal Place of Business

1107 POINSETTIA AVENUE
 ORLANDO FL 32804

Mailing Address

1107 POINSETTIA AVENUE
 ORLANDO FL 32804-6337

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3499794

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

PALMER, WILLIAM D
 3117-B EDGEWATER DRIVE
 ORLANDO FL 32804

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, 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 DV ☐ Delete
 NAME LINDRUM, FRANK
 STREET ADDRESS 1107 POINSETTIA AVE.
 CITY-ST-ZIP ORLANDO FL 32804

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

TITLE DS ☐ Delete
 NAME LINDRUM, PAULA
 STREET ADDRESS 1107 POINSETTIA AVE.
 CITY-ST-ZIP ORLANDO FL 32804

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

TITLE DC ☐ Delete
 NAME BROUGHTON, DAN H
 STREET ADDRESS P.O. BOX 907 N/A
 CITY-ST-ZIP WINDERMERE FL 34786

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

TITLE DP ☐ Delete
 NAME LINDRUM, DAVID
 STREET ADDRESS 518 S. 30TH ST
 CITY-ST-ZIP LAFAYETTE IN 47904

TITLE ☒ Change ☐ Addition
 NAME David Lindrum
 STREET ADDRESS 338 Bunker Place
 CITY-ST-ZIP Orlando FL 32804

TITLE DT ☐ Delete
 NAME LINDRUM, MARY JANE
 STREET ADDRESS 518 S. 30TH ST.
 CITY-ST-ZIP LAFAYETTE IN 47904

TITLE ☒ Change ☐ Addition
 NAME Mary Jane Lindrum
 STREET ADDRESS 338 Bunker Place
 CITY-ST-ZIP Orlando FL 32804

TITLE ☐ Delete
 NAME
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

17 MAR 2000 407 425-3222

CR2E034 (9/99)