

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90157 018 ***150.00

DOCUMENT # P98000014260

1. Entity Name
"INNER/G CORPORATION"



Principal Place of Business
1177 LOUISIANA AVE.
SUITE 208
WINTER PARK FL 32789

Mailing Address
1177 LOUISIANA AVE.
SUITE 208
WINTER PARK FL 32789

2. Principal Place of Business

35000 Nashua Blvd.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1207

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Sorrento, FL

Zip
32776

Country
USA

City & State
Sorrento, FL

Zip
32776-1207

Country
USA

4. FEI Number
59-3494481

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCDANIEL, HENRY B III
1177 LOUISIANA AVE.
SUITE 200
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name
Henry B. McDaniel, III
Street Address (P.O. Box Number is Not Acceptable)
35000 Nashua Blvd.
City
Sorrento FL Zip Code
32776

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

DATE
1/24/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
MCDANIEL, HENRY B III
1177 LOUISIANA AVE
WINTER PARK FL 32789 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
McDaniel, Henry B III
35000 Nashua Blvd.
Sorrento, FL 32776 ☒ Change ☐ Addition

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

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

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

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

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

12. 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 10 or Block 11 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

1/24/03

352-357-0129

Date Daytime Phone #

CR2E034 (10/02)