

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90309 049 ***150.00

DOCUMENT # P98000035127

1. Entity Name
E-TROOP.COM, INC.

Principal Place of Business

**12951 METRO PKWY
 STE 6
 FT. MYERS FL 33912**

Mailing Address

**12951 METRO PKWY
 STE 6
 FT. MYERS FL 33912**

2. Principal Place of Business

11438 WATERFORD VILLAGE DR.

Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 60793

Suite, Apt. #, etc.

City & State

Fort Myers FL

Zip

33913

Country

USA

City & State

Fort Myers FL

Zip

33906-6793

Country

USA

4. FEI Number **65-0846758**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PISARIS-HENDERSON, CRAIG A
 12951 METRO PKWY
 STE 6
 FT. MYERS FL 33912**

7. Name and Address of New Registered Agent

Name **LEACH, TODD**

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

11438 WATERFORD VILLAGE DR.

City

Fort Myers

FL

Zip Code

33913

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

Todd E. Leach

2/27/01

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, 2001 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

TITLE	D	Delete
NAME	PISARIS-HENDERSON, CRAIG A	
STREET ADDRESS	2400 SUNRISE BLVD.	
CITY-ST-ZIP	FT. MYERS FL 33907	
TITLE	D	Delete
NAME	GARCIA, ANTHONY A	
STREET ADDRESS	2105 PINE VIEW RD.	
CITY-ST-ZIP	FT. MYERS FL 33907	
TITLE	VSD	Delete
NAME	MORAN, JOHN	
STREET ADDRESS	11540 VILLA GRAND #1224	
CITY-ST-ZIP	FT MYERS FL 33913	
TITLE	D	Delete
NAME	LEACH, TODD	
STREET ADDRESS	11438 WATERFORD VILLAGE DR.	
CITY-ST-ZIP	FT MYERS FL 33913	
TITLE	D	Delete
NAME	RAUSHEL, TRACY P.	
STREET ADDRESS	145 KINGSWOOD RD.	
CITY-ST-ZIP	MANKATO, MN 56002	
TITLE	D	Delete
NAME	GABRIELSEN, DAWID M.	
STREET ADDRESS	8155 BLUE JENNUN DR.	
CITY-ST-ZIP	NOVELTY, OH 44012	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D, S	Change	Addition
NAME	PISARIS-HENDERSON, CRAIG A.		
STREET ADDRESS	11710 ROSEMEAD DR.		
CITY-ST-ZIP	Fort Myers, FL 33913		
TITLE	D, P	Change	Addition
NAME	LEACH, TODD		
STREET ADDRESS	11438 WATERFORD VILLAGE DR.		
CITY-ST-ZIP	Fort Myers, FL 33913		
TITLE		Change	Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		Change	Addition
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:

Todd E. Leach

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/01

Date

941.770.6782

Daytime Phone #

CR2E034 (10/00)