

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2002 8:00 am
Secretary of State

07-18-2002 90131 029 ***150.00

DOCUMENT # P98000047196

1. Entity Name
2-HEAD TECHNOLOGY COMPANY

Principal Place of Business
1298 CHAIRES CROSS RD
TALLAHASSEE FL 32311

Mailing Address
1298 CHAIRES CROSS RD
TALLAHASSEE FL 32311



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3513001**

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

MARSHALL, WILLIAM
3637 OCLEAN DR
TALLAHASSEE FL 32312

Name **HOGAN, BARRY D**
 Street Address (P.O. Box Number is Not Acceptable)
1298 CHAIRES CROSS RD

City **TALLAHASSEE** **FL** Zip Code **32317**

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 *Barry D Hogan*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/17/02
 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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **CEO**
 NAME **HOGAN, BARRY D** ☐ Delete
 STREET ADDRESS **1298 CHAIRES CROSS RD**
 CITY-ST-ZIP **TALLAHASSEE FL ~~32311~~ 32317**

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

TITLE **D**
 NAME **MARSHALL, WILLIAM D** ☐ Delete
 STREET ADDRESS **3637 OCLEAN DR**
 CITY-ST-ZIP **TALLAHASSEE FL 32312**

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

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

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

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

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

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

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

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

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

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: *Barry D Hogan* **REQUIRED SIGNATURE OF SIGNING OFFICER OR DIRECTOR** *Barry D. HOGAN* *7/17/02* *(850)410-2459*
 Date Daytime Phone #

CR2E034 (4/02)

Attachment
2-Head Technology Company
1298 Chaires Cross Road, Tallahassee, Florida 32317

798000471916
12222

July 17th, 2002

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

To Whom It May Concern:

This company did not receive the prior notice due to a mix up in the "registered agent". Please note the changes to registered agent on the enclosed report form. We are requesting a waiver of the late fee as allowed by your office. The regular fee of \$150.00 is enclosed.

Thanks for your time.

Sincerely,

Barry D. Hogan

Barry D. Hogan
CEO/President