

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 10, 2001 08:00 AM
Secretary of State

DOCUMENT # P98000067951

1. Entity Name
GLOBAL POSITIONING SERVICES, INC.

Principal Place of Business 9215 KINGSTON RD. BRADENTON FL 34210	Mailing Address 9215 KINGSTON RD. BRADENTON FL 34210
--	--

2. Principal Place of Business 203 72ND STREET	3. Mailing Address 203 72ND STREET
---	---------------------------------------

Suite, Apt. #, etc. SUITE B	Suite, Apt. #, etc. SUITE B
--------------------------------	--------------------------------

City & State HOLMES BEACH FL	City & State HOLMES BEACH FL
---------------------------------	---------------------------------

Zip 34217	Country	Zip 34217	Country
--------------	---------	--------------	---------

4. FEI Number 59-3521325	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HARRISON CHARLES R
 1400 W FAIRBANKS AVE SUITE 204

 WINTER PARK FL
 US

7. Name and Address of New Registered Agent

Name
STEINBERG DAVID B
 Street Address (P.O. Box Number is Not Acceptable)
 203 72ND STREET
 SUITE B
 City
HOLMES BEACH FL Zip Code
 34217

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 **DAVID B. STEINBERG**

04/10/2001

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 <input checked="" type="checkbox"/> Delete	NAME STEINBERG DAVID B
STREET ADDRESS 13824 OSPREY LINKS RD, APT 201	CITY-ST-ZIP ORLANDO FL 32837
TITLE D <input type="checkbox"/> Delete	NAME DUNLAP JARROD T
STREET ADDRESS 2353 QUAKER CT	CITY-ST-ZIP ORLANDO FL 32837
TITLE <input type="checkbox"/> Delete	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> Delete	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> Delete	NAME
STREET ADDRESS	CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME STEINBERG DAVID B
STREET ADDRESS 203 72ND STREET SUITE B	CITY-ST-ZIP HOLMES BEACH FL 34217
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> Change <input type="checkbox"/> 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: **David B. Steinberg**

D

04/10/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)