

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000086781

1. Entity Name

FLORIDA ACCESS CONTROL TECHNOLOGY SYSTEMS, INC.

Principal Place of Business

1843 PLEASANT VIEW CT
JACKSONVILLE FL 32225

Mailing Address

1843 PLEASANT VIEW CT
JACKSONVILLE FL 32216-1976

2. Principal Place of Business

4244 W. TENN ST
SUITE 269

3. Mailing Address

P.O. BOX 90

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAIHAASSEE, FL

City & State

LAKEVIEW NC

Zip

32304

Country

USA

Zip

28350

Country

USA

4. FEI Number

59-3537265

Applied For

Not Applicable

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

OWEN, JOHN D SR
1843 PLEASANT VIEW CT
JACKSONVILLE FL 32225

Name

JOHN D. OWEN SR

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

4244 W. TENN ST
SUITE 269

City

TAIHAASSEE

FL

Zip Code

32304

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 JOHN D. OWEN SR PRESIDENT

14 APR 2000

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)

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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	DP	<input type="checkbox"/> Delete
NAME	OWEN, JOHN D SR.	
STREET ADDRESS	1752 TIFFANY PINES STREET CIRCLE WEST	
CITY-ST-ZIP	JACKSONVILLE FL 32225	
TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	COSTELLO, ROSE	
STREET ADDRESS	1752 TIFFANY PINES STREET CIRCLE WEST	
CITY-ST-ZIP	JACKSONVILLE FL 32225	
TITLE	DST	<input type="checkbox"/> Delete
NAME	OWEN, BRIAN R	
STREET ADDRESS	1843 PLEASANT VIEW CT.	
CITY-ST-ZIP	JACKSONVILLE FL 32225	
TITLE	DC	<input type="checkbox"/> Delete
NAME	MCPHERSON, SAM	
STREET ADDRESS	1843 PLEASANT VIEW CT.	
CITY-ST-ZIP	JACKSONVILLE FL 32225	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4244 W. TENN ST	
STREET ADDRESS	TAIHAASSEE	
CITY-ST-ZIP	FL 32304	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	374 AILEEN ROAD	
STREET ADDRESS	LAKEVIEW NC	
CITY-ST-ZIP	28350	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4244 W. TENN ST	
STREET ADDRESS	TAIHAASSEE	
CITY-ST-ZIP	FL 32304	
TITLE	DVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARK HARRELL	
STREET ADDRESS	3309 DUPONT RD	
CITY-ST-ZIP	HAVANA, FL 32226	
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:

[Signature] REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14 APR 2000

Date

904-234-4924

Daytime Phone #

CR2E034 (9/99)



DO NOT WRITE IN THIS SPACE

FILED

Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90110 050 ***158.75