

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000087283

1. Entity Name

HEADSETS, Inc.

Principal Place of Business

7800 20th St, #874
Vero Beach, FL 32906

Mailing Address

PO Box 690609
Vero Beach, FL 32969

2. Principal Place of Business

401 E. ALFRED ST.
Suite, Apt. #, etc.

3. Mailing Address

401 E. ALFRED ST.
Suite, Apt. #, etc.

City & State

TAVARES, FL

City & State

TAVARES, FL

Zip

32778

Country

LAKE

Zip

32778

Country

LAKE

4. FEI Number

59-3537669

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

JAMES L. POWELL
7000 N. 20th St, #874
Vero Beach, FL 32966

7. Name and Address of New Registered Agent

Name JULIE M. BROWNING

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

401 E. ALFRED ST.

City TAVARES

FL

Zip Code

32778

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

Julie M. Browning

(NOTE: Registered Agent signature required when reinstating)

8/16/01

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 \$350.00

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 NAME JAMES L. POWELL, Pres ☒ Delete
STREET ADDRESS 7000 N. 20th St, #874
CITY-ST-ZIP Vero Beach, FL 32966

TITLE NAME ELLIE POWELL, V.P. ☒ Delete
STREET ADDRESS 7000 N. 20th St, #874
CITY-ST-ZIP Vero Beach, FL 32966

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME JULIE M. BROWNING ☐ Change ☒ Addition
STREET ADDRESS President
CITY-ST-ZIP 401 E. ALFRED ST.
TAVARES, FL 32778

TITLE NAME CRYSTAL A. ADAMS, V.P. ☐ Change ☒ Addition
STREET ADDRESS 41011 Thomas Boat Landing Rd
CITY-ST-ZIP UMATILLA, FL 32784

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

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

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

TITLE NAME ☐ Change ☐ Addition
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)(f), 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:

Julie M. Browning

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/16/01

352-742-5044

1228P

Original Phone #

AMENDED
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE

\$61.25

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