

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 05, 2003 8:00 am**  
**Secretary of State**

08-05-2003 90074 011 \*\*\*150.00

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AV

**DOCUMENT # P98000100707**

1. Entity Name  
**SALONE CONSULTING GROUP, INC.**



Principal Place of Business  
**2040 DELTA WAY  
TALLAHASSEE FL 32303**

Mailing Address  
**2040 DELTA WAY  
TALLAHASSEE FL 32303**

2. Principal Place of Business  
**1400 Metropolitan Blvd**

3. Mailing Address  
**1400 Metropolitan Blvd**

Suite, Apt. #, etc.  
**214**

Suite, Apt. #, etc.  
**214**

City & State  
**Tallahassee, FL**

City & State  
**Tallahassee, FL**

Zip Country  
**32308 USA**

Zip Country  
**32308 USA**

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number  
**59-3545560**

Applied For  
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**SALONE, MICHAEL A  
2040 DELTA WAY  
TALLAHASSEE FL 32303**

7. Name and Address of New Registered Agent

Name **MICHAEL A. SALONE**  
Street Address (P.O. Box Number is Not Acceptable)  
**1400 Metropolitan Blvd**  
**Suite 214**  
City **Tallahassee** **FL** Zip Code **32308**

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 **Michael A. Salone**  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**8/1/03**  
DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	<b>SALONE, MICHAEL A</b>	<b>808 LAKESHORE DR.</b>	<b>TALLAHASSEE FL 32312</b>	
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Michael A. Salone**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8/1/03** **850-894-8640**  
Date Daytime Phone #

CR2E034 (4/03)



Attachment

80136210

P98000100707

Salone Consulting Group  
1400 Metropolitan Blvd. Ste 214  
Tallahassee, Florida 32303

August 4, 2003

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Subject: Addendum

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To Whom It May Concern:

We recently received this UBR report. Enclosed is a check for \$150. Please call if there are any problems.

Please refer all inquiries regarding this correspondence to:

Rebecca Meiers  
Salone Consulting Group, Inc.  
1400 Metropolitan Blvd. Suite 214  
Tallahassee, FL 32303  
Phone: (850) 894-8640  
Fax: (850) 894-8639  
Email: rebecca.meiers@saloneit.com

Sincerely,

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Michael Salone  
President  
Salone Consulting Group, Inc.