

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 14, 2002 8:00 am**  
**Secretary of State**  
05-14-2002 90043 044 \*\*\*150.00

**DOCUMENT # P98000101052**

1. Entity Name

**R.E.G. NETS, INC.**

Principal Place of Business

**429 N LIME AVE  
SARASOTA FL 34236**

Mailing Address

**46 N. WASHINGTON BLVD. #1  
SARASOTA FL 34236**

2. Principal Place of Business

3. Mailing Address

**100 Wallace Ave**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Suite 100**

City & State

City & State

**SARASOTA FL**

Zip

Country

Zip

Country

**34237**

4. FEI Number

**65-0880157**

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

**WEINER, NEVIN A**

**46 N. WASHINGTON BLVD. #1  
SARASOTA FL 34236**

Name

**WEINER, NEVIN A**

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

**100 WALLACE AVENUE**

**SUITE 100**

City

**SARASOTA**

FL

Zip Code

**34237**

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

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, 2002 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DP  
STENGER, HARRY  
4917 32ND ST E  
BRADENTON FL 34203**

☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DVP  
STENGER, VINCENT  
1703 LITTLE POINT CIR  
SARASOTA FL 34231**

☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DST  
STENGER, ANNE  
1703 LITTLE POINT CIR  
SARASOTA FL 34231**

☐ Delete

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

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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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**4-23-02**

**941 935-2440**

CR2E034 (9/01)