

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000108362

1. Entity Name

COGENT SOLUTIONS, INC.

FILED
Apr 14, 2000 8:00 am
Secretary of State

04-14-2000 90068 015 ***150.00

Principal Place of Business

Mailing Address

509 W. HILLSBOROUGH AVE.
FLORAHOME FL 32140

509 W. HILLSBOROUGH AVE.
FLORAHOME FL 32140-1534

2. Principal Place of Business

1702 Eagle Watch Dr.

3. Mailing Address

1702 Eagle Watch Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orange Park, FL

City & State

Orange Park, FL

4. FEI Number

59-3548618

Applied For

Not Applicable

Zip

32073

Country

USA

Zip

32073

Country

USA

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

WILLIAMS, GRADY H JR.
1279 KINGSLEY AVE., STE. 117
ORANGE PARK FL 32073

Name

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

City

FL

Zip Code

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, 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 D ☐ Delete
NAME SPURGEON, RICHARD D
STREET ADDRESS 509 W. HILLSBOROUGH AVE.
CITY-ST-ZIP FLORAHOME FL 32140

TITLE Director ☒ Change ☐ Addition
NAME Spurgeon, Richard D
STREET ADDRESS 1702 Eagle Watch Dr.
CITY-ST-ZIP Orange Park, FL 32073

TITLE D ☐ Delete
NAME SPURGEON, ELIZABETH A
STREET ADDRESS 509 W. HILLSBOROUGH AVE.
CITY-ST-ZIP FLORAHOME FL 32140

TITLE Director ☒ Change ☐ Addition
NAME Spurgeon, Elizabeth A.
STREET ADDRESS 1702 Eagle Watch Dr.
CITY-ST-ZIP Orange Park, FL 32073

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/00

Date

(904) 923-1240

Daytime Phone #

CR2E034 (9/99)