

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 799000008060
Entity Name
SCORECARD MARKETING, INC.

FILED
Jun 03, 2000 8:00 am
Secretary of State
06-03-2000 90144 014 ***150.00

Principal Place of Business Mailing Address
7680 CAMBRIDGE MANOR PLACE 7680 CAMBRIDGE MANOR PLACE
SUITE 100 SUITE 100
FORT MYERS, FL 33907 FORT MYERS, FL 33907

Principal Place of Business 3. Mailing Address
7680 CAMBRIDGE MANOR PLACE 7680 CAMBRIDGE MANOR PLACE
Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE 202 SUITE 202
City & State City & State
FORT MYERS FL FORT MYERS FL
Zip Zip
33907 33907
Country Country
USA USA

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
65-0889632 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
JOHN A. MORAN
11540 VILLA GRAND #124
FORT MYERS, FL 33913

7. Name and Address of New Registered Agent
Name JOHN A. MORAN
Street Address (P.O. Box Number is Not Acceptable)
1499 TREDEGAR DR.
City FORT MYERS FL Zip Code 33919

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.
JOHN A. MORAN
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE
4-27-00

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. 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

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP
<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D JOHN A. MORAN 11540 VILLA GRAND #124 FORT MYERS, FL 33913		D JOHN A. MORAN 1499 TREDEGAR DR. FORT MYERS, FL 33919	
<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D DAVID A. RUSS 14742 OSPREY POINT DR. FORT MYERS, FL 33908	
<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	C. AARON CAMPBELL C. AARON CAMPBELL 8620 BUTTERCREEK DR. LAS VEGAS, NV	
<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		

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.
JOHN A. MORAN
SIGNATURE: 4-27-00 (941) 944-8204
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #