

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000012424

1. Entity Name

TECHNOLOGY MANAGEMENT SOLUTIONS, INC.

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90149 006 ***150.00

Principal Place of Business

Mailing Address

2531 DELORAINE TRAIL
MAITLAND FL 32751

2531 DELORAINE TRAIL
MAITLAND FL 32751-4020

2. Principal Place of Business

1411 Edgewater Drive

Suite, Apt. #, etc.
Suite 101

3. Mailing Address

1411 Edgewater Drive

Suite, Apt. #, etc.
Suite 101

City & State

Orlando, FL 32804

City & State

Orlando, FL 32804

Zip

Country

Orange

Zip

Country

Orange

4. FEI Number

59-3555119

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STEPHENS, ROBERT W
2531 DELORAINE TRAIL
MAITLAND FL 32751

7. Name and Address of New Registered Agent

Name

ROBERT W. STEPHENS

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

1411 Edgewater Dr., Suite 101

City

Orlando

FL

Zip Code

32804

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

TITLE ☐ Delete

NAME D
ANDERTON, SCOTT D
STREET ADDRESS 1249 NORWOOD PL
CITY-ST-ZIP ORLANDO FL 32804

TITLE ☐ Delete

NAME D
STEPHENS, ROBERT W
STREET ADDRESS 2531 DELORAINE TRAIL
CITY-ST-ZIP MAITLAND FL 32751

TITLE ☐ Delete

NAME D
HEWITT, ROBERT W
STREET ADDRESS 1411 EDGEWATER DR
CITY-ST-ZIP ORLANDO FL 32804

TITLE ☐ Delete

NAME D
BOWYER, JAMES W
STREET ADDRESS 900 LIVE OAK ST
CITY-ST-ZIP MAITLAND FL 32751

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☐ Change ☐ Addition

NAME Scott D. Anderton
STREET ADDRESS 1411 Edgewater Drive
CITY-ST-ZIP Orlando, FL 32804

TITLE Secretary ☐ Change ☐ Addition

NAME Robert W. Stephens
STREET ADDRESS 1411 Edgewater Drive
CITY-ST-ZIP Orlando, FL 32804

TITLE Director ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Director ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #