

# 2000 UNIFORM BUSINESS REPORT (UBR)

4/1

DOCUMENT # P99000013332

1. Entity Name

CONVERGENCE, INC.

**FILED**  
**May 18, 2000 8:00 am**  
**Secretary of State**

04-17-2000 90062 027 \*\*\*150.00

Principal Place of Business

Mailing Address

225 N. 20TH ST.  
TAMPA FL 33605

2205 N. 20TH ST.  
TAMPA FL 33605-3921

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEL Number

59-3565078

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

DELRYMPLE, JOHN  
2205 N. 20TH ST.  
TAMPA FL 33605

Name

John Delrymple

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

EVP  
Carl Wallace

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SRVP Business Development  
Dinco D'Orazio

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

John Delrymple

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

President / CFO  
Fasil Gabremariam

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Director  
Cass Casucci

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

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CITY-ST-ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ 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.

SIGNATURE:

(Signature, typed or printed name of signing officer or director)

Date

Daytime Phone #

3/30/00

CR2E034 (9/99)

**Convergence, Inc.**  
**Officers and Directors**

Doc # 103098

CEO and Chairman  
John Dalrymple  
2205 N. 20<sup>th</sup> Street  
Tampa, Florida 33605

President and CFO / Director  
Fassil Gabremariam  
2205 N. 20<sup>th</sup> Street  
Tampa, Florida 33605

EVP and COO / Director  
Carl Wallace  
2205 N. 20<sup>th</sup> Street  
Tampa, Florida 33605

SVP and CIO / Director  
Vincent D'Orazio  
2205 N. 20<sup>th</sup> Street  
Tampa, Florida 33605

Director  
Cass Casucci  
2205 N. 20<sup>th</sup> Street  
Tampa, Florida 33605

