

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000021904

1. Entity Name
MAPONE, INC.

Principal Place of Business
3742 S NOVA ROAD, SUITE 1
PORT ORANGE FL 32119

Mailing Address
251 BOULDER ROCK DR
PALM COAST FL 32137

2. Principal Place of Business
251 Boulder Rock Drive
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
PALM COAST, FLORIDA

City & State

4. FEI Number 59-3565251

Applied For
Not Applicable

Zip Country
32137 FLA

Zip Country

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

DENNO, JUDITH C
251 BOULDER ROCK DRIVE
PALM COAST FL 32137

Name

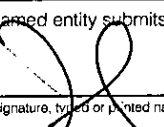
Street Address (P.O. Box Number is Not Acceptable)

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  FREDERICK A. DENNO

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04-26-01

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, 2001 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 ☐ Delete
NAME P
STREET ADDRESS DENNO, JUDITH C
CITY-ST-ZIP 251 BOULDER ROCK DRIVE
PALM COAST FL 32137

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

TITLE ☐ Delete
NAME CEO
STREET ADDRESS DENNO, FREDERICK A
CITY-ST-ZIP 251 BOULDER ROCK DRIVE
PALM COAST FL 32137

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

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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:  FREDERICK A. DENNO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-26-01

Date

904-447-6888
Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)