

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2001 8:00 am
Secretary of State
 04-09-2001 90037 046 ***150.00

03900323

DOCUMENT # P99000028927

1. Entity Name
GLOBAL BIZ SERVICES, INC.

Principal Place of Business
**2511 VASCO STREET
 SUITE 118
 PUNTA GORDA FL 33950**

Mailing Address
**2511 VASCO STREET
 SUITE 118
 PUNTA GORDA FL 33950**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0907619**

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

**JACKSON, GEORGE W
 1530 ORIOLE CT
 PUNTA GORDA FL 33950**

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, 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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**P
 JACKSON, GEORGE
 1530 ORIOLE CT
 PUNTA GORDA FL 33950** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**Vice President
 George Jackson
 1530 Oriole Court
 Punta Gorda FL 33950** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**STD
 THORDRSON, CYSTAIN
 3431 SAINT CROIX COURT
 PUNTA GORDA FL 33950** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**Chairman
 Eystein Thordarson
 5230 Blackjack Circle
 Punta Gorda FL 33982** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 SHANNON, TOMMY
 5071 CAPE COLE BLVD
 PUNTA GORDA FL 33950** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 SULLIVAN, JD
 289 BEAUPRE
 GROSSE POINTE MI 48236** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**Sr. Vice President
 JD Sullivan
 2619 Rio Plato Drive
 Punta Gorda FL 33950** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 FINSETH, JON A
 163 STONEFENCE LANE
 DUBLIN OH 43017** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**President / CEO
 Jon A Finseth
 2245 Via esplanade
 Punta Gorda FL 33950** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 GRILLO, PAUL A
 17 CULLEN WAY
 EXETER NH 03833** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
Chief Financial officer ☒ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/05/01

Date

941-639-6161

Daytime Phone #

CR2E034 (10/00)