

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000031435

1. Entity Name
NETWORK SENTRIES, INC.

FILED
Aug 03, 2000 8:00 am
Secretary of State

08-03-2000 90035 047 ***550.00

Principal Place of Business

634 TUSCANNY STREET
BRANDON FL 33511

Mailing Address

634 TUSCANNY STREET
BRANDON FL 33511

2. Principal Place of Business

3. Mailing Address

813 EAST BLOOMINGDALE AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

236

City & State

BRANDON FLORIDA

4. FEI Number

59-3569224

Applied For

Not Applicable

Zip

Country

33511

Country

U.S.A

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

BROWN, DONALD A
634 TUSCANNY STREET
BRANDON FL 33511

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
D
BROWN, DONALD A
634 TUSCANNY STREET
BRANDON FL 33511

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
TEWKSBURY, CRAIG
12322 EIGHTY SECOND AVENUE
SEMINOLE FL 33772

☐ Delete

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

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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:

Donald A. Brown
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 24, 2000
Date

813-205-1719
Daytime Phone #

CR2E034 (5/00)