

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000041424

FILED
Apr 16, 2002 8:00 AM
Secretary of State

Entity Name: TRUITT INTERNATIONAL CONSULTING, INC.

Current Principal Place of Business:

1900 MAIN STREET
STE 210
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

46 N. WASHINGTON BLVD., #1
SARASOTA, FL 34236

New Mailing Address:

NEVIN A. WEINER, P.A., 100 WALLACE AVENUE
SUITE 100
SARASOTA, FL 34237

FEI Number: 65-0922813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEINER, NEVIN A
46 N. WASHINGTON BLVD., #1
SARASOTA, FL 34236

Name and Address of New Registered Agent:

WEINER, NEVIN A
100 WALLACE AVENUE
SUITE 100
SARASOTA, FL 34237

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:

04/16/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TRUITT, PAMELA G
Address: 2735 HIBISCUS STREET
City-St-Zip: SARASOTA, FL 34239

Title: DVPS () Delete
Name: TRIUTT, CLIFFORD
Address: 2735 HIBISCUS STREET
City-St-Zip: SARASOTA, FL 34239

Title: T () Delete
Name: HOWER, GEOFFREY G
Address: 2735 HIBISCUS STREET
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: TRUITT, PAMELA G
Address: P.O. BOX 701
City-St-Zip: SARASOTA, FL 34230

Title: DVPS (X) Change () Addition
Name: TRIUTT, CLIFFORD
Address: P.O. BOX 701
City-St-Zip: SARASOTA, FL 34230

Title: T (X) Change () Addition
Name: HOWER, GEOFFREY G
Address: P.O. BOX 701
City-St-Zip: SARASOTA, FL 34230

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAMELA TRUITT

DP

04/16/2002

Electronic Signature of Signing Officer or Director

Date