

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000041792

1. Entity Name

BRAUN MOBILE TRAINING SERVICES, INC.

**FILED**  
**May 09, 2000 8:00 am**  
**Secretary of State**

05-09-2000 90098 037 \*\*\*150.00

Principal Place of Business

1363 HARTLEY AVE.  
DELTONA FL 32725

Mailing Address

P.O. BOX 5015  
DELTONA FL 32728-5015

2. Principal Place of Business

43 CRAYCROFT AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DEBARY FL

City & State

DEBARY FL

4. FEI Number

59-3573268

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BRAUN, MARK L  
1363 HARTLEY AVE.  
DELTONA FL 32725

7. Name and Address of New Registered Agent

Name Robin Braun

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

43 CRAYCROFT AVE

City DeBary

FL

Zip Code 32713

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

Mark L Braun Mark Braun

4/20/00

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

TITLE Co-President ☐ Delete  
NAME Robin Braun  
STREET ADDRESS  
CITY-ST-ZIP

TITLE President ☐ Delete  
NAME Mark Braun  
STREET ADDRESS 43 Craycroft Ave  
CITY-ST-ZIP DeBary FL 32713

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Co-President ☒ Change ☐ Addition  
NAME Robin Braun  
STREET ADDRESS 43 Craycroft Ave  
CITY-ST-ZIP DeBary FL 32713

TITLE Co-President ☐ Change ☒ Addition  
NAME Terrilyn Seilkop  
STREET ADDRESS c/o 43 Craycroft Ave  
CITY-ST-ZIP DeBary FL 32713

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

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 an other like empowered.

SIGNATURE:

Robin Braun Robin Braun

4/20/00

407-753-0772

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #