

**2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000043251

1. Entity Name  
LIONSNET.COM, INC.Principal Place of Business  
3650 -17TH ST.  
SARASOTA FL 34235Mailing Address  
3650 -17TH ST.  
SARASOTA FL 34235

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

## 6. Name and Address of Current Registered Agent

STRUBLE, DONALD W  
3650 -17TH ST.  
SARASOTA FL 342354. FEI Number **APPLIED FOR**  
**65-0918279**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

## 7. Name and Address of New Registered Agent

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 State10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PD  
CARTNER, PATRICK  
4917 20 STREET CT EAST  
BRADENTON FL 34203 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
STRUBLE, DONALD W  
1910 ROLLING GREEN CIRCLE  
SARASOTA FL 34240 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
TD  
ARNO, RICHARD G  
3650 -17TH ST.  
SARASOTA FL 34234 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VSD  
ARNO, PHYLLIS J  
888 BLVD OF THE ARTS #1404  
SARASOTA FL 34236 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
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STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED**  
**May 15, 2001 8:00 am**  
**Secretary of State**

05-15-2001 90168 027 \*\*\*150.00

00065774



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)