

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000047388

1. Entity Name

AMERICAN MANUFACTURERS.COM, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT 16 AM 7:51

Principal Place of Business 7820 S. Holiday Dr. Suite 320 Sarasota, FL 34231	Mailing Address 7820 S. Holiday Dr. Suite 320 Sarasota, FL 34231
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2. Principal Place of Business 285B N. Lake View Blvd. Suite, Apt. #, etc.	3. Mailing Address 285B N. Lake View Blvd. Suite, Apt. #, etc.
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City & State Cocoa, FL	City & State Cocoa, FL
Zip 33926	Zip 33926
Country U.S.	Country U.S.

4. FEI Number 59-3582223	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
James Neal Hutchinson
7820 S. Holiday Dr., Suite 320
Sarasota, FL 34231

7. Name and Address of New Registered Agent
Name
Marc Timm
Street Address (P.O. Box Number is Not Acceptable)
285B N. Lake View Blvd.
City
Cocoa, FL
FL
Zip Code
33926

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 _____ (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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete Gerald C. Parker 101 Phillipe Parkway, Ste. 3000 Safety Harbor, FL 34695
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete Marc Timm 101 Phillipe Parkway, Ste. 3000 Safety Harbor, FL 34695
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete Andrew Badolato 7820 S. Holiday Dr. Sarasota, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition PLEASE SEE ATTACHED SHEET FOR CHANGES AND ADDITIONS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 600003440285-10 -10/26/00--01049--016 *****61.25 *****61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition AD

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: _____ (321) 639-0914
Date: 9/29/2000
Daytime Phone #

AMERICANMANUFACTURERS.COM
DOCUMENT #P990000473888
ADDITIONS AND CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Chairman
NAME Gerald C. Parker
ADDRESS 285B N. Lake View Blvd.
CITY ST ZIP Cocoa, FL 32926

TITLE Director / VP / CTO / Asst. Secretary
NAME Marc Timm
ADDRESS 285B N. Lake View Blvd.
CITY ST ZIP Cocoa, FL 32926

TITLE Director / VP
NAME Andrew Badolato
ADDRESS 285B N. Lake View Blvd.
CITY ST ZIP Cocoa, FL 32926

TITLE Director / President / *CEO*
NAME Kevin Krause
ADDRESS 285B N. Lake View Blvd.
CITY ST ZIP Cocoa, FL 32926

TITLE VP
NAME Tony Gomes
ADDRESS 285B N. Lake View Blvd.
CITY ST ZIP Cocoa, FL 32926