

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000050495**

1. Entity Name

CRIMINAL DEFENSE RESOURCES, INC.

Principal Place of Business

1800 N. MAIN ST.**GAINESVILLE
32609****FL**

Mailing Address

P.O. BOX 5252**TALLAHASSEE
323145252****FL**

2. Principal Place of Business

1313 N. GADSDEN STREET

3. Mailing Address

1313 N. GADSDEN STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TALLAHASSEE**FL**

City & State

TALLAHASSEE**FL**Zip
32303Country
USZip
32303

Country

4. FEI Number

59-3583622

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**GLANTZ MICHAEL T
1800 N. MAIN ST.****GAINESVILLE
32609****FL**

7. Name and Address of New Registered Agent

Name

GLANTZ MICHAEL T

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

1313 N. GADSDEN STREET

City

TALLAHASSEE**FL**Zip Code
32303

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 **MICHAEL T. GLANTZ**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

04/25/2000

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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
CARR ROY CV
1313 NORTH GADSDEN STREET
TALLAHASSEE FL 32303**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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 all other like empowered.

SIGNATURE

P. G. S. I.

V.

04/25/2000