

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90257 015 ***150.00

DOCUMENT # P99000064443

1. Entity Name
ICU INVESTIGATIONS INC.

Principal Place of Business
4232 CENTRAL SARASOTA PKWY #817
SARASOTA FL 34238

Mailing Address
P O BOX 1062
OSPREY FL 34229



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4321 Charing Cross Rd
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

SARASOTA

City & State

Zip

34241

Country

SARASOTA

Zip

Country

4. FEI Number

65-0946818

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NAUGHTON, PRISCILLA
4232 CENTRAL SARASOTA PKWY
SARASOTA FL 34238

7. Name and Address of New Registered Agent

Name

Priscilla Naughton

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

4321 Charing Cross Rd

City

SARASOTA

FL

Zip Code

34241

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 **Priscilla Naughton**

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

(NOTE: Registered Agent signature required when reinstating)

Jan 8-2002

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, 2002 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 **P** ☐ Delete
NAME **NAUGHTON, PRISCILLA**
STREET ADDRESS **4232 CENTRAL SARASOTA PKWY**
CITY-ST-ZIP **SARASOTA FL 34238**

TITLE **D** ☐ Delete
NAME **MONTEUSCO, JOHN**
STREET ADDRESS **P O BOX 1062**
CITY-ST-ZIP **OSPREY FL 34229**

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 ☒ Change ☐ Addition
NAME **Priscilla Naughton**
STREET ADDRESS **4321 Charing Cross Rd**
CITY-ST-ZIP **SARASOTA FL 34241**

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

TITLE ☐ Change ☐ Addition
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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 all other like empowered.

SIGNATURE:

Priscilla Naughton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan 8-2002 941-926-2888

CR2E034 (9/01)