FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

07-08-2002 90229 037 ****61.25

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Entity Name

P99 0000 73161
POS PLUS, INC

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2. Principal Place of Business	3. Mailing Address
5002 Woodmere Lake Circle, A-102	5002 Woodmere Lake Circle
Suite, Apt. #, etc.: A-102	Suite, Apt. #, etc.: A-102
City & State: Naples, FL.	City & State: Naples, FL
Zip: 34112 Country: US	Zip: 34112 Country: US

4. FEI Number: 65-0961328 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Deborah S. Cantor

Street Address (P.O. Box Number is Not Acceptable): 5002 Woodmere Lake Circle A-102

City: Naples FL Zip Code: 34112

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: Deborah S. Cantor
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) ☐

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	President
NAME	Deborah S. Cantor
STREET ADDRESS	5002 Woodmere Lake Circle, A102
CITY-ST-ZIP	Naples, FL 34112
TITLE	Vice President
NAME	Guy F. Stevens
STREET ADDRESS	5002 Woodmere Lake Circle, A-102
CITY-ST-ZIP	Naples, FL. 34112
TITLE	
NAME	
STREET ADDRESS	Amend
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CR2E034B (12/01)

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7/2/15

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Deborah S. Cantor 7-2-02 239-530-7241
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #