

2001 UNIFORM BUSINESS REPORT (UBR)

5/

FILED
Jun 08, 2001 8:00 am
Secretary of State

05-12-2001 90043 018 ***150.00

DOCUMENT # P99000076855

1. Entity Name

EPROJECT.NET, INC.

Principal Place of Business

4436 HOLLYGATE CT.
 JACKSONVILLE FL 32258

Mailing Address

4436 HOLLYGATE CT.
 JACKSONVILLE FL 32258

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5711 Richard St. Suite 1

3730 Harbor Acres Lane

City & State

City & State

Jacksonville, FL

Jacksonville, FL

Zip

Country

Zip

Country

32216

32257

4. FEI Number

APPLIED FOR

Applied For

59-3596944

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VENTERS, DAVID G
 4436 HOLLYGATE CT.
 JACKSONVILLE FL 32258

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 State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
 NAME VENTERS, DAVID G
 STREET ADDRESS 4436 HOLLYGATE CT.
 CITY-ST-ZIP JACKSONVILLE FL 32258

TITLE D ☐ Delete
 NAME DUNN, WAYNE A
 STREET ADDRESS 3730 HARBOR ACRES LANE
 CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE D ☐ Delete
 NAME GRINNAN, J. ALLAN JR.
 STREET ADDRESS 5711 RICHARD ST., STE. 1A-2
 CITY-ST-ZIP JACKSONVILLE FL 32216

TITLE D ☐ Delete
 NAME KREINIST, DAVID E
 STREET ADDRESS 801 LIGHTWOOD CT.
 CITY-ST-ZIP ORANGE PARK FL 32065

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 Treasurer ☐ Change ☒ Addition
 NAME VENTERS, TERNIL L.
 STREET ADDRESS 4436 HOLLYGATE CT.
 CITY-ST-ZIP JACKSONVILLE, FL 32258

TITLE Secretary ☐ Change ☒ Addition
 NAME DUNN, ELIZABETH
 STREET ADDRESS 3730 HARBOR ACRES LANE
 CITY-ST-ZIP JACKSONVILLE, FL 32257

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)