# 2000 UNIFORM BUSINESS REPORT (UBR)

8/.

**DOCUMENT # P99000077160**    R

1. Entity Name

**VORTECH SYSTEMS, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 3948 SOUTH THIRD STREET, #317<br>JACKSONVILLE BEACH FL 32250 | 3948 SOUTH THIRD STREET, #317<br>JACKSONVILLE BEACH FL 32250 |

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |

**4. FEI Number** 59-3595052   Applied For   Not Applicable

| Zip | Country | Zip | Country |
|---|---|---|---|

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

**6. Name and Address of Current Registered Agent**

CONRAD, ROBERT R
3948 SOUTH THIRD STREET, #317
JACKSONVILLE BEACH FL 32250

**7. Name and Address of New Registered Agent**

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 $550.00**<br>After SEPTEMBER 13, 2000 Min. will be $750.00<br>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 | | 12. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
|---|---|---|---|---|---|---|
| TITLE | PTD | ☐ Delete | TITLE | | ☐ Change | ☐ Addition |
| NAME | WALTON, ROBERT | | NAME | | | |
| STREET ADDRESS | 11 31ST AVENUE SOUTH | | STREET ADDRESS | | | |
| CITY-ST-ZIP | JACKSONVILLE BEACH FL 32250 | | CITY-ST-ZIP | | | |
| TITLE | VPD | ☐ Delete | TITLE | | ☐ Change | ☐ Addition |
| NAME | CONRAD, ROBERT R | | NAME | | | |
| STREET ADDRESS | 10 10TH STREET, #D-21 | | STREET ADDRESS | | | |
| CITY-ST-ZIP | ATLANTIC BEACH FL 32233 | | CITY-ST-ZIP | | | |
| TITLE | VPSD | ☐ Delete | TITLE | | ☐ Change | ☐ Addition |
| NAME | ASHLEY, DAVID | | NAME | | | |
| STREET ADDRESS | 1300 SHETTER AVENUE, #12 | | STREET ADDRESS | | | |
| CITY-ST-ZIP | JACKSONVILLE BEACH FL 32250 | | CITY-ST-ZIP | | | |
| TITLE | | ☐ Delete | TITLE | | ☐ Change | ☐ Addition |
| NAME | | | NAME | | | |
| STREET ADDRESS | | | STREET ADDRESS | | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | | |
| TITLE | | ☐ Delete | TITLE | | ☐ Change | ☐ Addition |
| NAME | | | NAME | | | |
| STREET ADDRESS | | | STREET ADDRESS | | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | | |
| TITLE | | ☐ Delete | TITLE | | ☐ Change | ☐ Addition |
| NAME | | | NAME | | | |
| STREET ADDRESS | | | STREET ADDRESS | | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | | |

CR2E034 (5/00)

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.
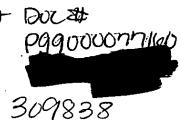
SIGNATURE: _____SIGNATURE RECORDED_____   8/18/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR    Date    Daytime Phone #

# TAX ADVANTAGE

Income Tax Services
Financial & Insurance Services
Accounting & Bookkeeping Services

JAMES K. REESE, EA
RICHARD L. ROSS, EA

1201 North Third Street • Jacksonville Beach, Florida 32250 • (904) 241-0050 • Fax (904) 241-0752

August 17, 2000

Division of Corporations
Post Office Box 6327
Tallahassee, FL 32302

Re: Vortech Systems, inc. – 2000 Uniform Business Report

Dear Sir or Madam:

We are in receipt of your 2000 Uniform Business Report and are asking your assistance in accepting the enclosed check for $150.00 and the completed report. The Taxpayer never received the original report earlier this year. When we first learn this non-receipt, we complete and finalized this report and mailed it to your attention. Your cooperation and understanding is appreciated in advance.

If you have any questions, please do not hesitate to contact me.

Sincerely,

James K. Reese, EA

Enclosures:
2000 Uniform Business Report
Check for $150.00