

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **99000080141**

1. Entity Name

**MATHEMATICAL MODELING, INC**

APPROVED  
AND  
FILED

00 SEP 14 PM 5:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**TALLAHASSEE, FL**

**7145 SHADY GROVE WAY  
TALLAHASSEE, FL 32312**

2. Principal Place of Business

3. Mailing Address

**TALLAHASSEE, FL**

**7145 SHADY GROVE WAY**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

**TALLAHASSEE, FL**

**TALLAHASSEE, FL**

Zip

Country

Zip

Country

**32312**

**USA**

**32312**

**USA**

4. FEI Number

☒ Applied For

☐ 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

**DR. FREDERICK J. FOREMAN  
7145 SHADY GROVE WAY  
TALLAHASSEE, FL 32312**

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 **Frederick J. Foreman**

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

(NOTE: Registered Agent signature required when reinstating)

**9-14-00**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT & CEO** ☐ Delete  
NAME **DR. FREDERICK J. FOREMAN**  
STREET ADDRESS **7145 SHADY GROVE WAY**  
CITY-ST-ZIP **TALLAHASSEE, FL 32312**

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

TITLE **VICE PRESIDENT** ☐ Delete  
NAME **DARRELL CHILDS**  
STREET ADDRESS **P.O. BOX 37031**  
CITY-ST-ZIP **TALLAHASSEE, FL 32315**

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS **800003393988--7**  
CITY-ST-ZIP **-09/15/00--01008--001**

TITLE **VICE PRESIDENT** ☐ Delete  
NAME **JOHN GORSUCH**  
STREET ADDRESS **530 COLLINSFORD RD**  
CITY-ST-ZIP **TALLAHASSEE, FL 32301**

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS **\*\*\*\*160.00 \*\*\*\*158.75**  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **VICE PRESIDENT** ☐ Delete  
NAME **DR. RAY H. O'NEAL, JR**  
STREET ADDRESS **7145 SHADY GROVE WAY**  
CITY-ST-ZIP **TALLAHASSEE, FL 32312**

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

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

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

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

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

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: **Frederick J. Foreman**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**9-14-00**

Date

**850-894-4713**

Daytime Phone #

CR2E034 (9/99)

To Whome it May Concern,

Our corporation, Mathematical Modeling, Inc.,  
did not receive the UBR for the year 2000.

We request that the late fees associated  
with our Annual fees be waived due to the  
fact that we did not receive the 2000 UBR.

Thank you,

Frederick J. Foreman

Dr. Frederick J. Foreman

President & CEO

Mathematical Modeling, Inc.