

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2003 8:00 am
Secretary of State

02-06-2003 90064 025 ***158.75

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1. Entity Name
REALTYNEXUS, INC.



Principal Place of Business

**2429 NW 64TH ST
BOCA RATON FL 33496**

Mailing Address

**2901 CLINT MOORE RD., STE. 128
BOCA RATON FL 33496**

2. Principal Place of Business

MIZNER PARK OFFICE TOWER

Apt. #, etc. #300

225 NE MIZNER BLVD

City & State

BOCA RATON, FL

3. Mailing Address

Suite, Apt. #, etc.

City & State

4. FEI Number

65-0955464

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

GOLDSTEIN, MARK B

2700 N MILITARY TR

#220

BOCA RATON FL 33431-6394

7. Name and Address of New Registered Agent

Name

EDWARD GODMAN

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

2429 NW 64TH ST.

City

BOCA RATON

FL

Zip Code

33496

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

1/23/03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **CCEO** ☐ Delete
NAME **GODMAN, EDWARD**
STREET ADDRESS **2429 NW 64TH ST**
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE **SVPD** ☐ Delete
NAME **FULFER, RANDALL C**
STREET ADDRESS **2429 NW 64TH ST**
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE **TD** ☐ Delete
NAME **GODMAN, CORY**
STREET ADDRESS **2429 NW 64TH ST**
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE **PCOO** ☐ Delete
NAME **BENNINGS, JACK**
STREET ADDRESS **530 NW 107TH AVE**
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE **VPD CTO** ☒ Change ☐ Addition
NAME **FULFER, RANDALL C**
STREET ADDRESS **320 PLAZA REAL #404**
CITY-ST-ZIP **BOCA RATON, FL 33432**

TITLE **TDS** ☒ Change ☐ Addition
NAME **CORY GODMAN**
STREET ADDRESS **2429 NW 64TH ST.**
CITY-ST-ZIP **BOCA RATON, FL 33496**

TITLE **PCOOD** ☒ Change ☐ Addition
NAME **BENNINGS, JACK**
STREET ADDRESS **530 NW 107TH AVE.**
CITY-ST-ZIP **PLANTATION, FL 33324**

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Edward Godman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/03
Date

561-995-6924
Daytime Phone #

CR2E034 (10/02)