

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000089743

1. Entity Name

VIRTUAL CONTEXT, INC.

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90084 014 ***150.00

Principal Place of Business

Mailing Address

~~12840 MEADOWBREEZE DRIVE~~
~~WELLINGTON FL 33414~~

~~12840 MEADOWBREEZE DRIVE~~
~~WELLINGTON FL 33414-2014~~

2. Principal Place of Business

6019 Via Venetia South

Suite, Apt. #, etc.

3. Mailing Address

6019 Via Venetia South

Suite, Apt. #, etc.

City & State

Delray Beach FL

Zip

33484

Country

US

City & State

Delray Beach FL

Zip

33484

Country

US

4. FEI Number

650955039

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Jody Gorran

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

6019 Via Venetia South

City

Delray Beach

FL

Zip Code

33484

7. Name and Address of New Registered Agent

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

Jody Gorran

Jody Gorran

3/2/00

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, 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

TITLE ☐ Delete
NAME D
GORRAN, JODY
STREET ADDRESS ~~12840 MEADOWBREEZE DRIVE~~
CITY-ST-ZIP ~~WELLINGTON FL 33414~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6019 Via Venetia South
CITY-ST-ZIP Delray Beach FL 33484

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

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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:

Jody Gorran

Jody Gorran

3/2/00

561 312-2870

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)