

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000092153

1. Entity Name
AZTECH COMPUTER SYSTEMS, INC.

FILED
Aug 01, 2000 8:00 am
Secretary of State

08-01-2000 90002 003 ***550.00

Principal Place of Business
209 SOUTH HALIFAX AVENUE
DAYTONA BEACH FL 32118

Mailing Address
209 SOUTH HALIFAX AVENUE
DAYTONA BEACH FL 32118

A0070377



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

611 North Wymore Road
Suite, Apt. #, etc.
Suite 219

3. Mailing Address

611 North Wymore Road
Suite, Apt. #, etc.
Suite 219

City & State
Winter Park, FL

City & State
Winter Park, FL

4. FEI Number
59-3612571

Applied For
Not Applicable

Zip
32789

Country

Zip
32789

Country

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

6. Name and Address of Current Registered Agent

ROBERT M. GARDNER, P.A.
209 SOUTH HALIFAX AVENUE
DAYTONA BEACH FL 32118

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
611 North Wymore Road
Suite 219
City Winter Park FL Zip Code 32789

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
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP	P, S Stephen T. Funk 209 South Halifax Avenue Daytona Beach, FL 32118	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, T Robert M. Gardner 209 South Halifax Avenue Daytona Beach, FL 32118	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	611 N. Wymore Road, Suite 219 Winter Park, FL 32789	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	611 N. Wymore Road, Suite 219 Winter Park, FL 32789	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert M. Gardner, Vice President (407) 644-4002
07/24/2000

Date

Daytime Phone #