## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P99000104442

Entity Name: REMOTEDATANET, INC.

FILED Apr 26, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

640 S. WASHINGTON BLVD., SUITE 175 SARASOTA, FL 34236

Current Mailing Address: New Mailing Address:

640 S. WASHINGTON BLVD., SUITE 175 P.O. BOX 25236

SARASOTA, FL 34236 SARASOTA, FL 342772236

FEI Number: 65-0966198 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HARMON, ELIZABETH
640 S. WASHINGTON BLVD., SUITE 175
SARASOTA, FL 34236
HARMON, ELIZABETH
1600 N. LODGE DRIVE
SARASOTA, FL 34239

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: ELIZABETH HARMON 04/26/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 P
 (X) Change ( ) Addition

 Name:
 HARMON, ELIZABETH
 Name:
 HARMON, ELIZABETH

Address: 1600 N. LODGE DRIVE
City-St-Zip: SARASOTA, FL 34239

Address: 1600 N. LODGE DRIVE
City-St-Zip: SARASOTA, FL 34239

City-St-Zip: SARASOTA, FL 34239

Title: D () Delete Title: () Change () Addition

 Name:
 DUNN, DAN
 Name:

 Address:
 1837 JODECO ROAD
 Address:

 City-St-Zip:
 STOCKBRIDGE, GA 30281
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH HARMON P 04/26/2002