

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 09, 2002 8:00 am**  
**Secretary of State**

04-09-2002 90058 050 \*\*\*150.00

0800181 AT

**DOCUMENT # P99000105288**

1. Entity Name  
**EZCARD, INC.**

Principal Place of Business  
**1401 MANATEE AVE W.  
 SUITE 500  
 BRADENTON FL 34205**

Mailing Address  
**1401 MANATEE AVE W.  
 SUITE 500  
 BRADENTON FL 34205**

2. Principal Place of Business  
**3707 24th Ave W**

3. Mailing Address  
**P.O. Box 15056**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Bradenton, FL**

City & State  
**Bradenton, FL**

4. FEI Number  
**65-0965127**

Applied For  
 Not Applicable

Zip  
**34205**

Country  
**Manatee**

Zip  
**34280**

Country  
**Manatee**

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

**ROSS, FRANK G JR  
 1401 MANATEE AVE W.  
 BRADENTON FL 34205**

Name  
**Patsy Geiger**  
 Street Address (P.O. Box Number is Not Acceptable)  
**3707 24th Ave W**  
 City  
**Bradenton** **FL** Zip Code  
**34205**

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

(NOTE: Registered Agent signature required when reinstating)

**3-28-02**  
 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, 2002 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  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PCD  
 ROSS, FRANK  
 PO BOX 14326  
 BRADENTON FL 34280** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PCD  
 Rick Anderson  
 P.O. Box 7  
 Ozona, FL 34660** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VSD  
 TUPIN-FANNON, KATHE  
 PO BOX 14326  
 BRADENTON FL 34280** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VD  
 Suzanne Wilkins  
 P.O. Box 7  
 Ozona, FL 34660** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DST  
 Patsy Geiger  
 3703 24th Ave W  
 Bradenton, FL 34205** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 Larry Bartholomew  
 P.O. Box 7  
 Ozona, FL 34660** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 William Killerlain  
 P.O. Box 7  
 Ozona, FL 34660** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 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: *Patsy Geiger*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-28-02**  
 Date Daytime Phone #

CR2E034 (9/01)