

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 19, 2001 8:00 am
Secretary of State

02-19-2001 90021 003 ***158.75

DOCUMENT # S57073

1. Entity Name

GEO SURV3, INC.

Principal Place of Business

19012 FIRST STREET, SW
LUTZ FL 33549
US

Mailing Address

POST OFFICE BOX 1708
LUTZ FL 33549-1708
US

2. Principal Place of Business

19012 1st street SW

3. Mailing Address

PO Box 1708

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LUTZ, Florida

City & State

LUTZ, FLA

Zip

33549

Country

USA

Zip

33548-1708

Country

Northborough

4. FEI Number

59-3073791

Applied For

Not Applicable

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

COTTERILL, RONALD E.
3511 US HWY 19 NORTH
SUITE #302
PALM HARBOR FL 34684

Name

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

City

FL

Zip Code

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 \$150.00
After MAY 1, 2001 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 P ☐ Delete
NAME LONG, JEROLD
STREET ADDRESS 19012 FIRST STREET, SW
CITY-ST-ZIP LUTZ FL 33549

TITLE ☒ Change ☐ Addition
NAME Long, Jerold E.
STREET ADDRESS 19012 1st Street SW
CITY-ST-ZIP

TITLE VPST ☐ Delete
NAME HENTSCHEL, GREGORY E
STREET ADDRESS 19012-1ST STREET SW
CITY-ST-ZIP LUTZ FL 33549

TITLE ☒ Change ☐ Addition
NAME Greg Hentschel, Gregor E.
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME PIERCEFIELD, DAYNE R.
STREET ADDRESS 19012 FIRS ST. SW
CITY-ST-ZIP LUTZ FL 33549

TITLE ☒ Change ☐ Addition
NAME 19012 1ST STREET, S.W.
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME V.P. Woods, Steven M.
STREET ADDRESS 19012 1ST ST., S.W.
CITY-ST-ZIP LUTZ, FLA 33549

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEROLD E. Long, 2/13/01 - 813-948-1023

Date

Daytime Phone #

CR2E034 (10/00)