

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S64015

1. Entity Name

GEOFOCUS, INC.

Principal Place of Business

Mailing Address

4611 NW53RD AVENUE 4611 NW 53RD AVE.
GAINESVILLE FL 32606 GAINESVILLE FL
US 32606
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number
59-3073410

Applied For
Not Applicable

Zip

Country

Zip

Country

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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 reappointing)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirements and elects to do so. ☐
(See criteria on back)

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 PD
NAME ITIN, THOMAS W. ☐ Delete
STREET ADDRESS 7001 ORCHARD LAKE RD., SUITE 424
CITY-ST-ZIP WEST BLOOMFIELD MI

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

TITLE V
NAME VELAT, RON ☒ Delete
STREET ADDRESS 700 NW 12TH AVE
CITY-ST-ZIP DEERFIELD BCH FL 33442

TITLE ☒ Change ☐ Addition
NAME VP
STREET ADDRESS ZIEGLER, THOMAS
CITY-ST-ZIP 700 NW 12TH AVE
DEERFIELD BCH FL 33442

TITLE S
NAME ZIEGLER, THOMAS K. ☐ Delete
STREET ADDRESS 700 NW 12TH AVE
CITY-ST-ZIP DEERFIELD BCH FL 33442

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

TITLE D
NAME ZIEGLER, THOMAS K. ☐ Delete
STREET ADDRESS 700 NW 12TH AVE
CITY-ST-ZIP DEERFIELD BEACH FL 33442

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

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)(b), 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:

Thomas W. Itin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/26/01
Date

954-419-9922
Daytime Phone

FILED

01 JUN 27 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LS

CR2E034 (11/00)

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20/2



ACCOUNT NO. : 072100000032
REFERENCE : 196960 158081A
AUTHORIZATION : *Patricia Pizub*
COST LIMIT : \$ 550.00

ORDER DATE : June 22, 2001

ORDER TIME : 11:41 AM

ORDER NO. : 196960-015

CUSTOMER NO: 158081A

CUSTOMER: Angelica L. Amaro, Paralegal
Friedlob Sanderson Paulson &
1400 Glenarm Place
3rd Floor
Denver, CO 80202

ANNUAL REPORT FILING

NAME: GEOFOCUS, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea-EXT#1114

EXAMINER'S INITIALS: _____

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 JUN 27 PM 12:18
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING