

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S92640

1. Entity Name

PDR CONSULTING, INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90008 032 ***150.00

Principal Place of Business

Mailing Address

610 S MAITLAND AVE
MAITLAND FL 32751
US

P. O. BOX 1026
WINTER PARK FL 32790-1026
US

2. Principal Place of Business

1673 Mayfield Ave

3. Mailing Address

Suite, Apt. #, etc.

City & State

Winter Park, FL

City & State

Zip

Country

32789

USA

Zip

Country

4. FEI Number

59-3100426

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHONG, STEPHEN C., ESQUIRE
605 E. ROBINSON STE.
SUITE 510
ORLANDO, FL 3 FL 32801

7. Name and Address of New Registered Agent

Name

Mark C. Filburn, Esquire

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

221 Northeast Ivanhoe Boulevard

Suite 205

City

Orlando

FL

Zip Code

32804

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

Mark C. Filburn

Mark C. Filburn

3/21/2000

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, 2000 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

TITLE D
NAME MCCARTHA, PAULA ROSOW
STREET ADDRESS 1673 MAYFIELD AVE
CITY-ST-ZIP WINTER PARK FL 32789 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME McCartha, Otha Ray
STREET ADDRESS 1673 Mayfield Ave
CITY-ST-ZIP Winter Park, FL 32789 ☐ Change ☒ Addition

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

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

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

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

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:

Paula Rosow McCartha

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/00

Date

407

342 0109

Daytime Phone #

CR2EN34 (9/93)