

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 05, 2001 8:00 am  
Secretary of State

02-05-2001 90121 008 \*\*\*150.00

DOCUMENT # V12343

1. Entity Name  
S SQUARED PRODUCTIONS, INC.

Principal Place of Business  
1331 RED CEDAR CIRCLE  
FT COLLINS CO 80524  
US

Mailing Address  
1331 RED CEDAR CIRCLE  
FT COLLINS CO 80524  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3111798

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

ROBIN, TRACY J ESQ  
100 S ASHLEY DR, STE 1500  
TAMPA FL 33602

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  
NAME DP  
STREET ADDRESS MCCAFFREY, MAUREEN T  
CITY-ST-ZIP 1331 RED CEDAR CIRCLE  
FT COLLINS CO

☐ Delete

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

TITLE  
NAME DVP  
STREET ADDRESS FALES, STEVEN  
CITY-ST-ZIP 6011 RODMAN ST, 3RD FLOOR  
HOLLYWOOD FL

☐ Delete

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

TITLE  
NAME DS  
STREET ADDRESS SCLAFANI, EILEEN  
CITY-ST-ZIP 790 MANCILL RD  
WAYNE PA

☒ Delete

TITLE  
NAME DS  
STREET ADDRESS Brett Hooper BARNER  
CITY-ST-ZIP 125 Columbia Road, #831  
Ft. Collins, CO 80525 ☒ Change ☐ Addition

TITLE  
NAME T  
STREET ADDRESS SCLAFANI, S C  
CITY-ST-ZIP 790 MANCILL RD  
WAYNE PA

☐ Delete

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

TITLE  
NAME D  
STREET ADDRESS MCCAFFREY, JOAN M  
CITY-ST-ZIP 962 RICHMOND DR, STE #3  
FT COLLINS CO 80526

☐ Delete

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

TITLE  
NAME D  
STREET ADDRESS SHARP, SUSAN M  
CITY-ST-ZIP 1373 COLES AVE  
MOUNTANSIDE NJ 07093

☐ 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: Maureen McCaffrey  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/01 970-493-3793  
Date Daytime Phone #

CR2E034 (10/00)