

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90061 041 ***158.75

DOCUMENT # V40352

1. Entity Name

ICOT CENTER, INC.

Principal Place of Business

Mailing Address

13925 58 ST N
 CLEARWATER FL 33760

13925 58 ST N
 CLEARWATER FL 33760-3721
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3126444

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

ROGERS, DEBORA
13925 58 ST N
CLEARWATER FL 33760

Name **DENNIS W. HILL**

Street Address (P.O. Box Number is Not Acceptable)
13925 58TH STREET NORTH

City **CLEARWATER**

FL

Zip Code
33760

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

Dennis W. Hill

DENNIS W. HILL

4-28-00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
 NAME **SLOVACEK, MARVIN J**
 STREET ADDRESS **13925 58 ST N**
 CITY-ST-ZIP **CLEARWATER FL 33760**

TITLE **P** ☒ Change ☐ Addition
 NAME **H.-HELMUT RADTKE**
 STREET ADDRESS **13925 58TH STREET NORTH**
 CITY-ST-ZIP **CLEARWATER, FL 33760**

TITLE **V** ☒ Delete
 NAME **MAKELA, SCOTT**
 STREET ADDRESS **13925 58 ST N**
 CITY-ST-ZIP **CLEARWATER FL 33760**

TITLE **V** ☐ Change ☒ Addition
 NAME **GREGORY E. MIERZWINSKI**
 STREET ADDRESS **13925 58TH STREET NORTH**
 CITY-ST-ZIP **CLEARWATER, FL 33760**

TITLE **ST** ☒ Delete
 NAME **ROGERS, DEBORA**
 STREET ADDRESS **13925 58 ST N**
 CITY-ST-ZIP **CLEARWATER FL 33760**

TITLE **T** ☐ Change ☒ Addition
 NAME **DENNIS W. HILL**
 STREET ADDRESS **13925 58TH STREET NORTH**
 CITY-ST-ZIP **CLEARWATER, FL 33760**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** ☒ Change ☐ Addition
 NAME **H.-HELMUT RADTKE**
 STREET ADDRESS **13925 58TH STREET NORTH**
 CITY-ST-ZIP **CLEARWATER, FL 33760**

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:

Dennis W. Hill

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DENNIS W. HILL

4-28-00

Date

(727) 524-4842

Daytime Phone #

CR2E034 (9/99)