

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90336 012 ***150.00

0067040

DOCUMENT # V54367

1. Entity Name

ADVANCED TECHNOLOGY MARKETING, INC.

Principal Place of Business

6005 ANNO AVE.
ORLANDO FL 32809

Mailing Address

6005 ANNO AVE.
ORLANDO FL 32809

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 59-3142242

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

NISI, FRANK P., JR.
205 E. CENTRAL BLVD.
SUITE 304
ORLANDO FL 32801

Name

FRANK P. NISI, JR.

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

2003 LAKE HOWE II LANE

City

Maitland

FL

Zip Code

32751

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 *Frank P. Nisi, Jr.*, Registered Agent

(If E: Registered Agent signature required when reinstating)

3/5/01
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 D ☐ Delete
NAME HERRINGTON, JERRY DEAN
STREET ADDRESS 2417 WOODWAY DRIVE
CITY-ST-ZIP ORLANDO FL

TITLE D.P.S.T. ☒ Change ☐ Addition
NAME HERRINGTON, JERRY DEAN
STREET ADDRESS 4442 LAKE CALABAY DR.
CITY-ST-ZIP ORLANDO, Fla 32837

TITLE D ☐ Delete
NAME PERROTTI, JAMES T.
STREET ADDRESS 5150 DOCKSIDE DR.
CITY-ST-ZIP ORLANDO FL

TITLE D.V.P. ☒ Change ☐ Addition
NAME PERROTTI, JAMES T.
STREET ADDRESS 5456 PARKWAY DRIVE
CITY-ST-ZIP ORLANDO, Fla 32809

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
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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: *Jerry Dean Herrington*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JERRY DEAN HERRINGTON

3/5/01

(407) 859-0127

Date

Daytime Phone #

CR2E034 (10/00)