

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90029 041 ***150.00

DOCUMENT # V57105

1. Entity Name

TECHNICAL RESOURCE PROFESSIONALS, INC.

Principal Place of Business

Mailing Address

**1580 MARS STREET
MERRITT ISLAND FL 32953**

**4828 LEEDS CT
DUNWOODY GA 30338-5026**

2. Principal Place of Business

3730 SUNWARD DR.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MERRITT ISLAND, FL

City & State

4. FEI Number

59-3140778

Applied For

Not Applicable

Zip

Country

32953 USA

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

**EHRlich, LISA THERESE
1580 MARS STREET
MERRITT ISLAND FL 32953**

Name **EHRlich, LISA THERESE**

Street Address (P.O. Box Number is Not Acceptable)
3730 SUNWARD DRIVE

City **MERRITT ISLAND FL** Zip Code **32953**

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 *Lisa T Ehrlich* **LISA T. EHRlich PRESIDENT 4/20/00**
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 **PST** ☐ Delete
NAME **EHRlich, LISA THERESE**
STREET ADDRESS **1580 MARS STREET**
CITY-ST-ZIP **MERRITT ISLAND FL 32953**

TITLE **PST** ☒ Change ☐ Addition
NAME **EHRlich, LISA THERESE**
STREET ADDRESS **3730 SUNWARD DRIVE**
CITY-ST-ZIP **MERRITT ISLAND, FL 32953**

TITLE ☐ Delete
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CITY-ST-ZIP

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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: *Lisa T Ehrlich* **LISA T. EHRlich 4/20/00 770-730-5771**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)