

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V64101

1. Entity Name

INTUIT SYSTEMS, INC.

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

04-03-2000 90119 018 \*\*\*150.00

Principal Place of Business

11715 SPANISH LAKE DR.  
TAMPA FL 32635

Mailing Address

4238 W. MORRISON AVE.  
TAMPA FL 33629-4301

2. Principal Place of Business

4238 W. MORRISON AVE

3. Mailing Address

Suite, Apt. #, etc.

City & State

TAMPA, FL

City & State

4. FEI Number

59-3141594

Applied For

Not Applicable

Zip

33629-4301

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HACKETT, WALTER C., JR.  
11715 SPANISH LAKE DR.  
TAMPA FL 32635

7. Name and Address of New Registered Agent

Name

HACKETT, WALTER C., JR.

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

11715 SPANISH LAKE DR.

City

TAMPA

FL

Zip Code

33629

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

*Walter C. Hackett Jr.*

WALTER C. HACKETT JR., Director 3-17-00

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

TITLE D  
NAME HACKETT, WALTER C., JR.  
STREET ADDRESS 11715 SPANISH LAKE DR.  
CITY-ST-ZIP TAMPA FL ☐ Delete

TITLE SDT  
NAME MANZI, MABEL  
STREET ADDRESS 4238 W MORRISON AVE  
CITY-ST-ZIP TAMPA FL 33629 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME HACKETT, WALTER C., JR. ☒ Change ☐ Addition  
STREET ADDRESS 4238 W. MORRISON AVE  
CITY-ST-ZIP TAMPA, FL 33629

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:

*Walter C. Hackett Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER C. HACKETT JR

Date

Director 3-17-00

Daytime Phone #

813-636-5073

CR25034 (9/00)