

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 10, 2002 8:00 am
Secretary of State

04-10-2002 90669 040 ***150.00

DOCUMENT # P01000014082

1. Entity Name

Endec, Inc.

DO NOT WRITE IN THIS SPACE

B0064747

2. Principal Place of Business

1285 Tallevast Rd.

3. Mailing Address

Suite, Apt. #, etc.

SAME

DO NOT WRITE IN THIS SPACE

City & State

Sarasota FL

City & State

4. FEI Number

65-1082090

Applied For

Not Applicable

Zip

34243

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Dewalt, Judy

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

1285 Tallevast Rd.

City

Sarasota

FL

Zip Code

34243

**DO NOT WRITE
IN THIS SPACE**

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)

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$6125
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	Dewalt, Judy
STREET ADDRESS	1285 Tallevast Rd.
CITY-ST-ZIP	Sarasota, FL 34243
TITLE	
NAME	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Judy Dewalt

4.3.02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)