

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90164 042 ***150.00

DOCUMENT # 210914

1. Entity Name

BAILEY MOTOR EQUIPMENT CO

Principal Place of Business

805 W. CENTRAL BLVD.
 P O BOX 3386
 ORLANDO FL 32805
 US

Mailing Address

805 W. CENTRAL BLVD.
 P O BOX 3386
 ORLANDO FL 32805
 US

2. Principal Place of Business

3. Mailing Address

20 N. Nashville Ave

20 N. Nashville Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite A

Suite A

City & State

City & State

ORLANDO FL

ORLANDO, FL

Zip

Country

Zip

Country

32805 U.S.

32805 U.S.



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-0833954

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

MILLER, MITCHELL A
458 LAKE BRINGE LN APT 724
APOPKA FL 32703

Name

Mitchell A. Miller

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

2306 Musselwhite Ave

City

ORLANDO

FL

Zip Code

32804

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

Mitchell A. Miller

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-15-01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

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 Delete
STD
 NAME **EASTERLING, MICHAEL A**
 STREET ADDRESS **3261 INVERNESS CT.**
 CITY-ST-ZIP **ORLANDO FL 32806**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **PD**
 STREET ADDRESS **MILLER, MITCH A**
 CITY-ST-ZIP **1148 N. FAIRWAY DR. APOPKA FL 32712**

TITLE Change Addition
 NAME **PD**
 STREET ADDRESS **Mitchell A. Miller**
 CITY-ST-ZIP **2306 Musselwhite Ave ORLANDO, FL 32804**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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 STREET ADDRESS
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TITLE Change Addition
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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:

Mitchell A. Miller
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)