

2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 26, 2001 8:00 am**  
**Secretary of State**

04-26-2001 90060 018 \*\*\*150.00

DOCUMENT # **334324**

1. Entity Name  
**STINSON ENTERPRISES, INC.**

Principal Place of Business <b>2188 E SEMORAN BLVD          APOPKA FL 32703</b>	Mailing Address <b>2188 E SEMORAN BLVD          APOPKA FL 32703</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **59-1236362** Applied For Not Applicable

Zip Country 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

**STINSON, A. M. JR  
 5204 HEDGE COURT  
 ORLANDO FL**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City State Zip Code

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: \_\_\_\_\_ (NOTE: Registered Agent's signature required when re-instating) DATE: \_\_\_\_\_

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	NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
SD	STINSON, PATRICIA K	5204 HEDGE COURT	ORLANDO, FL 00000				
COB	STINSON, ALTON M, JR	52041 HEDGE COURT	ORLANDO, FL 00000				
D	KINSLEY, JERRY	517 HARBOUR ISLAND DR	ORLANDO, FL 00000				
P	A.M. STINSON 111	2436 MIKLER	ORLANDO FL				

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 reports 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 of that officer or trustee empowered.

SIGNATURE: Am. Stinson Jr. 4/17/01 407-889-4128

CR2E034 (10/00)