

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Apr 03, 2001 08:00 AM**  
**Secretary of State**

**DOCUMENT # 365851**  
 1. Entity Name  
**WATER AND AIR RESEARCH INCORPORATED**

Principal Place of Business 6821 S.W. ARCHER ROAD  GAINESVILLE FL 32608	Mailing Address 6821 S.W. ARCHER ROAD  GAINESVILLE FL 32608
--	--

2. Principal Place of Business  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
City & State	City & State

4. FEI Number  
**59-1302326**  
 Applied For   
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**  
 ZEGEL, W C  
 6821 SW ARCHER ROAD  
  
 GAINESVILLE FL 32608  
 US

**7. Name and Address of New Registered Agent**  
 Name  
 ZEGEL WILLIAM C  
 Street Address (P.O. Box Number is Not Acceptable)  
 6821 SW ARCHER ROAD  
  
 City GAINESVILLE FL Zip Code 32608

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 WILLIAM C ZEGEL 04/03/2001  
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, 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KINSER WILLIAM 5533 SW 92ND WAY GAINESVILLE FL 32608 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MOSURA, E LYNN 2025 SW 19TH WAY GAINESVILLE FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STEINBERG JERRY A. 8507 SW 5TH PL GAINESVILLE, FL 00000 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HEIN MICHAEL 3210 SW 10TH TERR GAINESVILLE, FL 00000 32607 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EVANS, DAVID L 2302 NW 15TH PL GAINESVILLE FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZEGEL, WILLIAM C 11011 NW 12TH PLACE GAINESVILLE, FL 00000 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KINSER WILLIAM M 7020 SW 93RD AVENUE GAINESVILLE FL 32608 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MOSURA-BLISS ELIZABETH L 2025 SW 19TH WAY GAINESVILLE FL 32608 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STEINBERG JERRY A 8507 SW 5TH PL GAINESVILLE FL 32607 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HEIN MICHAEL K 3210 SW 10TH TERR GAINESVILLE FL 32607 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EVANS DAVID L 8321 SW 23RD PLACE GAINESVILLE FL 32607 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZEGEL WILLIAM C 11011 NW 12TH PLACE GAINESVILLE FL 32606 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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:** WILLIAM C ZEGEL P 04/03/2001  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)