

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 591660

FILED  
Apr 19, 2003  
Secretary of State

Entity Name: BAND SAW BLADES, INC.

**Current Principal Place of Business:**

311 NE 9TH ST  
OCALA, FL 34470

**New Principal Place of Business:**

**Current Mailing Address:**

311 NE 9TH ST  
OCALA, FL 34470

**New Mailing Address:**

FEI Number: 59-1855757      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOWMAN, THEODORE J.  
311 NE 9TH ST.  
OCALA, FL 34470      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: BOWMAN, THEODORE JAM, ES  
Address: 2440 NE 7TH ST.  
City-St-Zip: Ocala, FL 34470

Title: P      ( ) Delete  
Name: BOWMAN, THEODORE JAM, ES  
Address: 2440 NE 7TH ST.  
City-St-Zip: Ocala, FL 34470

Title: VTD      ( ) Delete  
Name: DONIE, ANN M.,  
Address: 46498 CAPLEWOOD COURT  
City-St-Zip: STERLING, VA 26165

Title: D      ( ) Delete  
Name: BOWMAN, THEODORE JAY,  
Address: 1106 JEFFERSON ST.  
City-St-Zip: BEARDSTOWN, IL 62618

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THEODORE JAMES BOWMAN

P

04/19/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date