

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90090 045 ****61.25

DOCUMENT # F94000001862

1. Entity Name

**ASSOCIATION OF ENERGY SERVICES PROFESSIONALS, IN
 CORPORATED**

Principal Place of Business

Mailing Address

6746 FINAMORE CIRCLE
 LAKE WORTH, FL 33467

6746 FINAMORE CIRCLE
 LAKE WORTH FL 33467

2. Principal Place of Business

17610 128th Trail North

3. Mailing Address

17610 128th Trail North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jupiter, FL

City & State

Jupiter, FL

4. FEI Number

33-0369768

Applied For

Not Applicable

Zip

33478

Country

USA

Zip

33478

Country

USA

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BOARDMAN, ELLIOT B
 6746 FINAMORE CIRCLE
 LAKE WORTH FL 33467

7. Name and Address of New Registered Agent

Name: **Boardman Elliot**
 Street Address (P.O. Box Number is Not Acceptable):
 17610 128th Trail North
 City: **Jupiter** FL Zip Code: **33478**

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.

Elliot B. Boardman, Executive Director

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

| | | |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BROWN, MARION 2131 WALNUT GROVE AVE, 3RD FLOOR ROSEMEAD CA 91770 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD MATT, MEG 14402 S 22ND STREET PHOENIX AZ 85048 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD FEY, JAKE 3628 S 35TH STREET TACOMA WA 98409 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | M BOARDMAN, ELLIOT B 6746 FINAMORE CIRCLE LAKE WORTH FL 33467 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | M BOARDMAN, ELLIOT B 17610 128 th Trail North Jupiter, FL 33478 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Elliot Boardman **ELLIOT B BOARDMAN 2.6.02 561/575-2334**

CR2E037 (9/01)