

FILED
Jun 19, 2003 8:00 am
Secretary of State

06-19-2003 90044 049 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # J84160

1. Entity Name
THE BREEZE CORPORATION



Principal Place of Business
2510 DEL PRADO BLVD
CAPE CORAL FL 33904-750
US

Mailing Address
2510 DEL PRADO BLVD
CAPE CORAL FL 33904-750
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2824932

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GLARROW, JOHN
2510 DEL PRADO BLVD
CAPE CORAL FL 33904

Name

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

City

FL

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME NUTTING, G. OGDEN
STREET ADDRESS 1500 MAIN ST
CITY-ST-ZIP WHEELING WV ☐ Delete

TITLE C/D
NAME ☒ Change ☐ Addition

TITLE VD
NAME NUTTING, WILLIAM C.
STREET ADDRESS 1500 MAIN ST
CITY-ST-ZIP WHEELING WV ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE SD
NAME NUTTING, WILLIAM C.
STREET ADDRESS 1500 MAIN ST
CITY-ST-ZIP WHEELING WV ☐ Delete

TITLE V/S/D
NAME ☒ Change ☐ Addition

TITLE VD
NAME NUTTING, ROBERT M.
STREET ADDRESS 1500 MAIN ST
CITY-ST-ZIP WHEELING WV ☐ Delete

TITLE P/D
NAME ☒ Change ☐ Addition

TITLE T
NAME WITTMAN, DUANE D
STREET ADDRESS 1500 MAIN ST
CITY-ST-ZIP WHEELING WV ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

DUANE D. WITTMAN

4/30/03

(304) 233-0100

850-245-6059