

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 15, 2001 8:00 am**  
**Secretary of State**

05-15-2001 90200 022 \*\*\*150.00

**DOCUMENT # L75503**

1. Entity Name  
**FLORIDA CLEAN AIR, INC.**

**00053483**



DO NOT WRITE IN THIS SPACE

Principal Place of Business C/O IAN F. IRWIN P.O. BOX 429 ST. PETERSBURG FL 33701	Mailing Address C/O IAN F. IRWIN P.O. BOX 429 ST. PETERSBURG FL 33701
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2. Principal Place of Business 100 Second Avenue North Suite, Apt. #, etc. Suite 200	3. Mailing Address Suite, Apt. #, etc.
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City & State St Petersburg, FL	City & State	4. FEI Number 59-3018530	Applied For Not Applicable
Zip 33701	Country Pinellas	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**IRWIN, IAN F.**  
**222 2ND STREET N.**  
**ST. PETERSBURG FL 33701**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)  
**100 Second Avenue North Suite 200**

City **St Petersburg** **FL** Zip Code **33701**

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 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS IRWIN, IAN F. 222 2ND ST. N. ST. PETERSBURG FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100 Second Avenue North Suite 200 St Petersburg, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T IRWIN, IAN F. 222 2ND ST. N. ST. PETERSBURG FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100 Second Avenue North Suite 200 St Petersburg, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V D GORDON, JR. S 222 2ND ST. N. ST. PETERSBURG FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100 Second Avenue North Suite 200 St Petersburg, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GORDON, S. JAY 222 2ND ST. N. ST. PETERSBURG FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100 Second Avenue North Suite 200 St Petersburg, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JENKINS, DAVID A. 222 2ND ST. N. ST. PETERSBURG FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100 Second Avenue North Suite 200 St Petersburg, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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:** Ian F Irwin Ian F Irwin, President 4/26/01 (727)821-5178  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)