

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 20, 2002 8:00 am
Secretary of State

08-20-2002 90132 048 ***150.00

DOCUMENT # P94000089169

1. Entity Name
EVAFLO FILTERS, INC.

Principal Place of Business
**4705 95TH STREET N
 SAINT PETERSBURG FL 33708
 US**

Mailing Address
**P.O. BOX 3075
 PINELLAS PARK FL 33780-3075
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
204 WILSON DR
 Suite, Apt. #, etc.

3. Mailing Address
PO Box 524
 Suite, Apt. #, etc.

City & State
INTERLACHEN, FL

City & State
INTERLACHEN, FL

Zip
32148 Country
USA

Zip
32148-0524 Country
USA

4. FEI Number **65-0523876** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

LEVIN, RICHARD E
4705 95TH STREET N
SAINT PETERSBURG FL 33708

7. Name and Address of New Registered Agent

Name
LEVIN, RICHARD E

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

City
INTERLACHEN FL Zip Code
32148

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]* (NOTE: Registered Agent signature required when reinstating)

DATE **8/10/2002**

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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	D <input type="checkbox"/> Delete LEVIN, RICHARD E 9933 39TH STREET NORTH PINELLAS PARK FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete GARCIA, JIM ANTHONY P O BOX 53359 SAN JOSE CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete LEVIN, ELEANOR 9933 39TH ST N PINELLAS PARK FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 204 WILSON DR INTERLACHEN, FL 32148
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 204 WILSON DR INTERLACHEN, FL 32148
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

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 an other like empowered.

SIGNATURE: *[Signature]* **REQUIRE** **RICHARD E. LEVIN** **8/10/02** **386-684-6020**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

CR2E034 (4/02)

Attachment

B0134755

P94000089169



EvaFlo Filters, Inc.

Environmentally We Make It Right

204 Wilson Drive, Interlachen, FL 32148
Mailing: P.O. Box 524, Interlachen, FL 32148-0524

(386) 684-6020

Fax: (386) 684-6025

August 10, 2002

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Re: Missing UBR Document #P94000089169

Dear Sir:

Enclosed please find UBR report for our company.

We originally mailed this report with a check for \$150 on April 15, 2002. In checking with our bank the check has not cleared our account and per your office we have canceled payment on that check. Since you have no record of receiving it either.

We request waiving of penalty fees and reinstatement of our corporation. We have enclosed a new check and the completed UBR report per your office's request.

If you have any questions please call 386-684-6020.

Thank you for your attention to this matter.

Sincerely,



Richard E. Levin, President
EvaFlo Filters, Inc.