

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000097520

1. Entity Name
ROGERS-DIERKS, INC.

FILED
SECRETARY OF STATE
FLORIDA CORPORATIONS

01 MAY 23 AM 10:26

Principal Place of Business
**C/O HEICO CORPORATION
3000 TAFT STREET
HOLLYWOOD FL 33021**

Mailing Address
**C/O HEICO CORPORATION
3000 TAFT STREET
HOLLYWOOD FL 33021**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **58-2428936**

Applied For
Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

**MENDELSON, VICTOR H ESQ.
3000 TAFT STREET
HOLLYWOOD FL 33021**

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
S	MENDELSON, VICTOR H	3000 TAFT STREET	HOLLYWOOD FL 33021	☐
P	KELLY, KEVIN	3000 TAFT STREET	HOLLYWOOD FL 33021	☐
C	MUNSIE, RICHARD	3000 TAFT STREET	HOLLYWOOD FL 33021	☒
AS	LETENDRE, ELIZABETH R	3000 TAFT STREET	HOLLYWOOD FL 33021	☐
TD	IRWIN, THOMAS S	3000 TAFT STREET	HOLLYWOOD FL 33021	☐
V	GADD, JOHN	3000 TAFT STREET	HOLLYWOOD FL 33021	☒

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas S. Irwin

4/30/01

954-744-7560

Date

Daytime Phone #