

AMENDED

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **S77456**

1. Entity Name
EMERSON, INC.

FILED
01 OCT 29 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

**6560 123rd Ave. N.
Largo, FL 33773
U.S.** **6560 123rd Ave. N.
Largo, FL 33773
U.S.**

2. Principal Place of Business 3. Mailing Address

**12651 62nd ST. N.
Suite, Apt. #, etc.** **12651 - 62nd ST. N.
Suite, Apt. #, etc.**

XP

DO NOT WRITE IN THIS SPACE

City & State City & State 4. FEI Number Applied For

LARGO, FL **LARGO, FL** **59-3087632** Not Applicable

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

33773 **U.S.** **33773** **U.S.**

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

**NORDQUIST, ERIN
6560 123rd Ave. N.
LARGO, FL 33773** Name **DEBBIE L. RITTER**

Street Address (P.O. Box Number is Not Acceptable)
3020 LAKE VISTA DRIVE

City **CLEARWATER** FL Zip Code **33759**

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 **Debbie L. Ritter** *Debbie L. Ritter* 10/25/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **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	PS NORDQUIST, JAMES V. 12877 PALM DR. LARGO, FL 33774 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS NORDQUIST, JAMES V. 12651 62nd ST. N. LARGO, FL 33773 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TV NORDQUIST, ERIN M. 12877 PALM DR. LARGO, FL 33774 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT RITTER, WILLIAM F. 3020 LAKE VISTA DRIVE CLEARWATER, FL 33759 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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
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
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CRZE034 (11/00)

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: *JV Nordquist* **JAMES V. NORDQUIST** 10/25/01 (727) 536-5655

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #