

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

0044920

DOCUMENT # V28118

1. Entity Name
BARANOWSKI & ASSOCIATES, INC.

04-11-2001 90112 030 ***150.00

Principal Place of Business 6910 TALLOW TREE RD SANFORD FL 32771	Mailing Address 6910 TALLOW TREE RD SANFORD FL 32771
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2. Principal Place of Business 481 PINE MEADOW DR. N.	3. Mailing Address 481 PINE MEADOW DR. N.
Suite, Apt. #, etc.	Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State DeBary, Florida	City & State DeBary, Florida	4. FEI Number 59-3121878	Applied For Not Applicable
Zip 32713	Country Volusia	Zip 32713	Country Volusia

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent BARANOWSKI, THEODORE 6910 TALLOW TREE RD. SANFORD FL 32771-8936	
7. Name and Address of New Registered Agent Name BARANOWSKI, THEODORE Street Address (P.O. Box Number is Not Acceptable) 481 PINE MEADOW DRIVE NORTH City DeBary FL Zip Code 32713	

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: *Theodore Baranowski* Vice President DATE: 4-8-01

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

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	DVT BARANOWSKI, THEODORE M 6910 TALLOW TREE RD/ SANFORD FL 32771 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT BARANOWSKI, THEODORE M. 481 PINE MEADOW DRIVE NORTH DeBary, FL. 32713 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS BARANOWSKI, DOROTHY E 6910 TALLOW TREE RD. SANFORD FL 32771 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS BARANOWSKI, DOROTHY E. 481 PINE MEADOW DRIVE NORTH DeBary, FL. 32713 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Theodore M. Baranowski* THEODORE M. BARANOWSKI
 DATE: 4-8-01 (407)753-9559

Signature and typed or printed name of signing officer or director. Date Daytime Phone #

CR2E034 (10/00)