

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 287501

FILED  
Apr 18, 2002 8:00 AM  
Secretary of State

Entity Name: T S E INDUSTRIES INC.

## Current Principal Place of Business:

5260 113TH AVE N  
PO BOX 17225  
CLEARWATER, FL 33760 US

## New Principal Place of Business:

4370 112TH TERRACE NORTH  
CLEARWATER, FL 337624902 US

## Current Mailing Address:

4370 112TH TERRACE N.  
CLEARWATER, FL 337624902

## New Mailing Address:

4370 112TH TERRACE NORTH  
CLEARWATER, FL 337624902

FEI Number: 59-1089552

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KLINGEL, ROBERT R.  
5260 113TH AVE N  
CLEARWATER, FL 33760 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KLINGEL, ROBERT R  
Address: 15530 GULF BLVD  
City-St-Zip: REDDINGTON BEACH, FL 33708

Title: VPD ( ) Delete  
Name: KLINGEL, HELEN A  
Address: P.O. BOX 130N/A  
City-St-Zip: MORRISTON, FL 32688

Title: SD ( ) Delete  
Name: KLINGEL, DIANE M  
Address: 15530 GULF BLVD.  
City-St-Zip: REDDINGTON BEACH, FL 33708

Title: TD ( ) Delete  
Name: TOTTLE, DAVID J  
Address: 5044 KILKENNDEY COURT  
City-St-Zip: OLDSMAR, FL 34677

Title: VP ( ) Delete  
Name: MIRRA, LOUIS J  
Address: 13799 PARK BLVD., #157  
City-St-Zip: SEMINOLE, FL 33776

Title: VP ( ) Delete  
Name: REESE, GARY A  
Address: 1124 HOUNDS RUN  
City-St-Zip: SAFETY HARBOR, FL 34695

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID J.TOTTLE

TREA

04/18/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date