

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 26, 2001 8:00 am**  
**Secretary of State**

01-26-2001 90077 011 \*\*\*150.00

**DOCUMENT # 314788**

1. Entity Name

**MICHAEL QUILL, INC.**

Principal Place of Business

**122 DIXIE LN  
COCOA BEACH FL 32931**

Mailing Address

**122 DIXIE LN  
COCOA BEACH FL 32931**

2. Principal Place of Business

**Same as above**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-0808129**

Applied For

Not Applicable

Zip

Country

**USA**

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**HILL, EDDIE O.  
4090 SHERIDAN AVE.  
COCOA FL 32926**

7. Name and Address of New Registered Agent

Name

**Chris R. Hunt**

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

**4770 Greenhill Street**

**Cocoa, Florida 32927**

City

**FL**

Zip Code **32927**

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 **Chris R. Hunt**

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

(NOTE: Registered Agent signature required when reinstating)

**1-08-01**

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 **P** ☒ Delete  
NAME **HILL, EDDIE O.**  
STREET ADDRESS **4090 SHERIDAN AVE.**  
CITY-ST-ZIP **COCOA FL 32926**

TITLE **V** ☒ Delete  
NAME **HUNT, CHRIS R.**  
STREET ADDRESS **4770 GREENHILL ST.**  
CITY-ST-ZIP **COCOA FL 32927**

TITLE **T** ☒ Delete  
NAME **BASKIN, MELANY S.**  
STREET ADDRESS **P.O. BOX 451, N/A**  
CITY-ST-ZIP **TITUSVILLE FL 32780**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Pres.** ☒ Change ☐ Addition  
NAME **Chris R. Hunt**  
STREET ADDRESS **4770 Greenhill St.**  
CITY-ST-ZIP **Cocoa, Florida 32927**

TITLE **VP** ☒ Change ☐ Addition  
NAME **John B. Marr**  
STREET ADDRESS **2894 Temple Lane**  
CITY-ST-ZIP **Mims, Florida 32754**

TITLE **Treas** ☒ Change ☐ Addition  
NAME **William Adams**  
STREET ADDRESS **4720 Byron Street**  
CITY-ST-ZIP **Cocoa, FL. 32927**

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

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

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

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: **Chris R. Hunt, President**

**1/8/01**

**321-783-2266**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)