

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2001 8:00 am**  
**Secretary of State**

05-01-2001 90049 019 \*\*\*158.75

0283411

**DOCUMENT # 445883**

1. Entity Name

**PIPE RITE UTILITIES, LTD., INC.**

Principal Place of Business

**300 WEST 10TH STREET  
P.O. BOX 9818  
RIVIERA BEACH FL 33404**

Mailing Address

**300 WEST 10TH STREET  
P.O. BOX 9818  
RIVIERA BEACH FL 33404**

2. Principal Place of Business

**1481 KINETIC ROAD**

Suite, Apt. #, etc.

3. Mailing Address

**POST OFFICE BOX 12185**

Suite, Apt. #, etc.

City & State

**LAKE PARK, FLORIDA**

City & State

**LAKE PARK, FLORIDA**

Zip

**33403**

Country

**USA**

Zip

**33403**

Country

**USA**

4. FEI Number

**59-1520245**

Applied For

Not Applicable

5. Certificate of Status Desired **XX**

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**EAKINS, DOUGLAS S  
300 WEST TENTH ST  
RIVIERA BCH FL 33404**

7. Name and Address of New Registered Agent

Name **DOUGLAS S. EAKINS**

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

**1481 KINETIC ROAD**

City

**LAKE PARK**

**FL**

Zip Code **33403**

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.

**PIPE RITE UTILITIES LTD., INC.**

**PIPE RITE UTILITIES LTD., INC.**

SIGNATURE **BY: DOUGLAS S. EAKINS AS PRESIDENT**

**BY: Douglas S. Eakins**

**4/5/01**

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

(NOTE: Registered Agent signature required when reinstating)

**AS PRESIDENT** 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	<b>PD</b>	<input type="checkbox"/> Delete
NAME	<b>EAKINS (DOUGLAS S.)</b>	
STREET ADDRESS	<b>300 WEST TENTH ST</b>	
CITY-ST-ZIP	<b>RIVIERA BCH FL</b>	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>PD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DOUGLAS S. EAKINS</b>	
STREET ADDRESS	<b>1481 KINETIC ROAD</b>	
CITY-ST-ZIP	<b>LAKE PARK, FLORIDA 33403</b>	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		

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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.

**PIPE RITE UTILITIES LTD., INC.**

SIGNATURE: **BY: Douglas S. Eakins AS PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/5/01**

Date

**(561) 842-0001**

Daytime Phone #

CR2E034 (10/00)