

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90223 034 ***150.00

NE01FC01 AT

DOCUMENT # 450350

1. Entity Name
RODGERS MACHINERY COMPANY, INC.

Principal Place of Business

**US 1 SOUTH
 PO BOX 428
 TITUSVILLE FL 32781**

Mailing Address

**US 1 SOUTH
 PO BOX 428
 TITUSVILLE FL 32781**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1520278

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**RODGERS, PHILLIP
 3450 OCEAN BEACH BLVD., #604
 NORTH BREVARD INDUSTRIAL PARK
 COCOA BCH. FL 32931**

7. Name and Address of New Registered Agent

Name **Phillip Rodgers**

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

4400 Windover Way

City **Melbourne**

FL

Zip Code
32941

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-28-02

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, 2002 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 **PD** ☐ Delete
 NAME **RODGERS, PHILLIP**
 STREET ADDRESS **3450 OCEAN BEACH BLVD., #604**
 CITY-ST-ZIP **COCOA BEACH FL**

TITLE **D** ☐ Delete
 NAME **LINDER, RALPH**
 STREET ADDRESS **5309 STAUGHTON DR.**
 CITY-ST-ZIP **INDIANAPOLIS IN**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 **PD** ☒ Change ☐ Addition
 NAME **Rodgers, Phillip**
 STREET ADDRESS **4400 Windover Way**
 CITY-ST-ZIP **Melbourne, Fl. 32941** ☐ Change ☐ Addition

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

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 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-28-02

321-269-3921

CR2E034 (9/01)