

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 456529

1. Entity Name

ACTION CHEMICAL & EQUIPMENT, INC.

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90078 046 ***150.00

Principal Place of Business

6454 BEACH BLVD
JACKSONVILLE FL 32216
US

Mailing Address

6454 BEACH BLVD
JACKSONVILLE FL 32216
US

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 59-1536302

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COREY, RONALD G.
6454 BEACH BLVD
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name Shirley BAKER
Street Address (P.O. Box Number is Not Acceptable)
6454 Beach Blvd
City Jacksonville FL Zip Code 32216

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

Shirley Baker - Secretary

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

(NOTE: Registered Agent Signature required when reinstating)

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
NAME COREY, RONALD G.
STREET ADDRESS 6454 BEACH BLVD
CITY-ST-ZIP JACKSONVILLE FL ☒ Delete

TITLE V
NAME OMRAN, WILLIAM A.
STREET ADDRESS 6454 BEACH BLVD
CITY-ST-ZIP JACKSONVILLE FL ☒ Delete

TITLE S
NAME OMRAN, WILLIAM A
STREET ADDRESS 6454 BEACH BLVD
CITY-ST-ZIP JACKSONVILLE FL ☒ Delete

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 P/C
NAME V. GLENN BAKER
STREET ADDRESS 6454 Beach Blvd
CITY-ST-ZIP Jacksonville, FL 32216 ☒ Change ☐ Addition

TITLE V/M
NAME BILLY J. MCDANIEL
STREET ADDRESS 6454 Beach Blvd.
CITY-ST-ZIP Jacksonville, FL 32216 ☒ Change ☐ Addition

TITLE S/T/D
NAME Shirley BAKER
STREET ADDRESS 6454 Beach Blvd
CITY-ST-ZIP Jacksonville, FL 32216 ☒ 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

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: Shirley Baker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)