

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 493769

FILED
Jul 03, 2002 8:00 AM
Secretary of State

Entity Name: KEGEL & STILLI, INC.

Current Principal Place of Business:

1461 COMMERCE CENTRE DRIVE
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

1461 COMMERCE CENTRE PARKWAY
PORT ST. LUCIE, FL 34986

Current Mailing Address:

1461 COMMERCE CENTRE DRIVE
PORT ST. LUCIE, FL 34986

New Mailing Address:

1461 COMMERCE CENTRE PARKWAY
PORT ST. LUCIE, FL 34986

FEI Number: 59-1674493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEGEL, THOMAS E
1461 COMMERCE CENTRE PARKWAY
PORT ST LUCIE, FL 34986 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: KEGEL, THOMAS E
Address: 1461 COMMERCE CENTRE DRIVE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: VSD () Delete
Name: KEGEL, MARY A
Address: 2654 SW WESTLAKE CIR
City-St-Zip: PALM CITY, FL

Title: TD () Delete
Name: KEGEL, EILEEN H
Address: 1461 COMMERCE CENTRE PARKWAY
City-St-Zip: PORT ST LUCIE, FL 34986

Title: D () Delete
Name: STILLI, DAVID
Address: 4948 BIMINI RD
City-St-Zip: JUPITER, FL

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:

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: EILEEN HENNESSY KEGEL

TD

07/03/2002

Electronic Signature of Signing Officer or Director

_____ Date