

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90104 022 ***558.75

DOCUMENT # 498925
1. Entity Name
ORLANDO REFRIGERATION, INC.

Principal Place of Business
1040 W AMELIA AVENUE
ORLANDO FL 32805

Mailing Address
1040 W AMELIA AVENUE
ORLANDO FL 32805



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1654903**
 Applied For
 Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
FLEMING, ANDREW J
1040 W AMELIA STREET
ORLANDO FL 32805

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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.

GNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00.
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PD	ROLLER, THOMAS B	<input type="checkbox"/> Delete			
STREET ADDRESS	1040 W. AMELIA AVENUE		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32805		CITY-ST-ZIP		
VE	STARCHER, RICHARD L	<input type="checkbox"/> Delete			
STREET ADDRESS	1040 W. AMELIA AVENUE		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32805		CITY-ST-ZIP		
VTSD	GARNER, C. KENT	<input type="checkbox"/> Delete			
STREET ADDRESS	1040 W. AMELIA AVENUE		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32805		CITY-ST-ZIP		
		<input type="checkbox"/> Delete			
		<input type="checkbox"/> Delete			
		<input type="checkbox"/> Delete			

CR2E034 (5/01)

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: *Richard L. Starcher* **Richard L. Starcher 407-422-1285**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #