

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 612879

1. Entity Name  
FERNCO SEVILLE CORPORATION

Principal Place of Business  
2520 DUNCAN RD  
SEVILLE FL 32190

Mailing Address  
PO BOX 10  
SEVILLE FL 32190

**FILED**  
Sep 05, 2001 8:00 am  
Secretary of State

09-05-2001 90027 020 \*\*\*550.00

0108288 AT



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1889951

Applied For  
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PREVATT, WAYNE M  
2520 DUNCAN RD  
SEVILLE FL 32190

Name

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

City

FL

Zip Code

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

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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME PD  
STREET ADDRESS PREVATT, WAYNE M.  
CITY-ST-ZIP 2520 DUNCAN RD  
SEVILLE FL

☐ Delete

☐ Change ☐ Addition

TITLE  
NAME VST  
STREET ADDRESS PREVATT, PAMELA J.  
CITY-ST-ZIP 2520 DUNCAN RD  
SEVILLE FL 32190

☐ Delete

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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☐ Change ☐ Addition

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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☐ Change ☐ Addition

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:

*Wayne M. Prevatt* (384) 749-2468  
8-16-01  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)