

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 618433

1. Entity Name

POWERS RADIATOR, INC.

FILED
Jul 14, 2000 8:00 am
Secretary of State

07-14-2000 90003 003 ***150.00

Principal Place of Business

2559 FOWLER STREET
FT MYERS FL 33901

Mailing Address

2559 FOWLER STREET
FT MYERS FL 33901

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1918236

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

WARDEN, PAUL WILLIAM
2559 FOWLER STREET
FT. MYERS FL

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 13, 2000 Min. 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 ☐ Delete
NAME PD
STREET ADDRESS WARDEN, PAUL WILLIAM
CITY-ST-ZIP 2559 FOWLER
FT MYERS, FL 00000

TITLE ☐ Change ☒ Addition
NAME T/S
STREET ADDRESS Kaylene A. Warden
CITY-ST-ZIP 2559 Fowler Street
FT-MYERS FL 33901

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/5/00

Date

(941) 332-0036

Daytime Phone #

DOC# 618433

ADD 67720

POWERS RADIATOR INC.
2559 FOWLER STREET
FORT MYERS, FL 33901
(941) 332-0036
(941) 332-7035 FAX

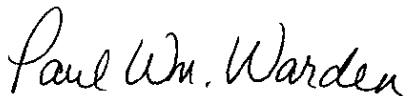
July 5, 2000

RE: Division of Corporations
Filing Fees

To Whom It May Concern,

Please be advised that enclosed is our filing fees for this year. I read through the new form to try and understand why they were so late. I figured that the filing dates had changed. I immediately got on the phone and called your office and spoke with Gary and he had to point out to me that this is a Second Notice. I apologize for being late but, for some reason this is the only notice that our office has ever received for the renewal. This is the first year that this has ever happened to us as our past history will show that we have always been on time. Again, I apologize.

Sincerely,



Paul William Warden, Owner

Enclosure