2001 UNIFORM BUSINESS KEPORT (UBR)				page lot		
DOCUI	MENT# 677861					
AUTO CHLOR SUNCOAST INC				FILED		
Principal Place of Business Mailing Address				01 MAR -8 PM 1: 14		
		-		SECRETARY OF STATE		
MAITLAND FL 3275/				TALLAHASSEE, FLORIDA		
Principal Place of Business 3. Mailing Address				_		
Suite, Apt. #, etc. Suite, Apt. #		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & Sixte		4. FEI Number Applied For		
76	Country	1 10	Country	59 2037034	Not Applicable 8.75 Additional	
					ee Required	
	6. Name and Address of Current R	••	Name	7. Name and Address of New Registered A		
Dennis J BRYSON 133 ATRANTIC DR.			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
	MAI + Im d	c DK.	-			
	MAITME	3275/	City	FL	Zip Code	
8. The above	named entity submits this statement for	the purpose of changing its	registered office or register	ered agent, or both, in the State of Florida.		
SIGNATURE Signature, typod or printer hame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
Tax filing requirement and elects to do so. After MAY 1, 2001			FEE IS \$150.00 01 Fee will be \$550.00 06 to Department of SI	I Hugi Fund Contribution. Ca	\$5.00 May Be Added to Fees	
11.	OFFICERS AND D		12.	ADDITIONS/CHANGES TO OFFICERS AND I		
NAME	President Dennis J Bryson	☐ Delete	TITLE NAME	300003851 -03/13/010		
STREET ADDRESS CITY-ST-ZIP	MAITCAND FL	32751	STREET ADDRESS CITY-ST-ZIP	****150.08	****150.00	
TITLE	DIRECTOR	☐ Delete	TITLE	300003851	Change Addition	
NAME STREET ADDRESS	dames DTAYCON		NAME STREET ADDRESS	-03/13/011	01112024	
CITY-ST-ZIP	MAITCAND	FC 32751	CITY-ST-ZIP		****] 5 [] [] Change	
NAME PERSON F- TAY IN			NAME			
STREET ADDRESS CITY-ST-ZIP	133 AT MIC AT	LANTIC DR	STREET ADDRESS CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS			
CITY-ST-ZIP		·	CITY-ST-ZIP			
TITLE NAME			TITLE NAME		Change Addition	
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP	***		
CITY-ST-ZIP		☐ Delete	TITLE	 45	Change Addition	
NAME			NAME STREET ADDRESS	·		
STAGET ADDRESS CITY-ST-ZIP	-		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: 1) - O By DEANIS J Bryson 4078317800 K203						
SIGNATURE: GNATURE AND TYPED OR PRINTED NAME OF GIGNING OFFICER OR DIRECTOR Date Daytime Phone #						

February 28, 2001

Florida Department Of State

We did not receive our notice to renew our Corporate Registration for 2000, and therefore did not prepare and summit our form for the year 2000.

We would like to pay \$150.00 for 2000 and \$150.00 for 2001 and respectfully request you waive the \$600.00 penalty. Had we received the Registration form in 2000, we would have filed it and paid the fee just like we have done since 1981.

The \$300.00 is enclosed.

Thank you for your help

Sincerely Yours,

Dennis J Bryson,

President,

AUTO-CHLOR SUNCOAST INC.