

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90007 019 ****61.25

DOCUMENT # 712162

1. Entity Name

MACHINISTS #57 BUILDING CORPORATION

Principal Place of Business

125 U.S. HWY. 27
 SOUTH BAY FL 33493

Mailing Address

125 U.S. HWY. 27
 SOUTH BAY FL 33493

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7104889

Applied For

Not Applicable

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

KLUEGEL, ROBERT
125 US HWY. 27, NORTH
SOUTH BAY FL 33493

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PD
SEIDENSTUCKER, KURT
505 REDISH CR
CLEWISTON FL 33440

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PD
MILLER, Robert
710 W. AVINEDA DEL RIO
Clewiston, FL 33443

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VD
MILLER, ROBERT
710 W AVINEDA DEL RIO
CLEWISTON FL 33440

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VD
Smith, Patrick
706 Midstate Loop
Clewiston, FL 33440

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SD
SHIELDS, JIM
125 US HWY 27 NORTH
SOUTH BAY FL 33493

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TSD
THOMPSON, GREG
1801 MATTHEW LOOP
CLEWISTON FL 33440

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TSD
DWENS, THOMAS
Rte. 62, Box 648 H
Clewiston, FL 33440

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

THOMAS B. DWENS REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-01 561-996-7500

Date

Daytime Phone #

CR2E037 (10/00)