

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766160

1. Entity Name

PEACE ENGINEERING, INCORPORATED

Principal Place of Business

JOHN H. MILLER
104B SPRINGWOOD CIR
LONGWOOD FL 32750
US

Mailing Address

P O BOX 160847
ALTAMONTE SPRINGS FL 32716
US

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

NOT APPLICABLE

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

MILLER JR, JOHN H
104B SPRINGWOOD CIRCLE
LONGWOOD FL 32750

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
After September 12, 2001, min. will be \$236.25

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
D
HENNESSEY, JOHN R.
35 RUSSIA STREET
SAN FRANCISCO CA

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
MILLER JR, JOHN H
104B SPRINGWOOD CIRCLE
LONGWOOD, FL 00000

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
POLLARD, RAMSEY JR
201 RIDGECREST DR
ELIZABETHTON TN 37643

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
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MILLER JR, JOHN H
104B SPRINGWOOD CIRCLE
LONGWOOD FL

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☐ 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:

SIGNATURE: JOHN H. MILLER

JOHN H. MILLER

8-22-01

407-260-5982

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90011 019 ****61.25

00063782



DO NOT WRITE IN THIS SPACE

CR2E037 (5/01)