

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 15, 2002 8:00 am**  
**Secretary of State**

08-15-2002 90046 032 \*\*\*150.00

**DOCUMENT # F00000007022**

1. Entity Name  
**HANDEX OF THE CAROLINAS, INC.**

Principal Place of Business  
**3600-G WOODPARK BLVD.**  
**CHARLOTTE NC 28206-4222**

Mailing Address  
**30941 SUNEAGLE DR**  
**MT. DORA FL 32757**

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 **62-1474209**

Applied For  
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NRA SERVICES, INC.**  
**526 E. PARK AVE.**  
**TALLAHASSEE FL 32301**

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. I am familiar with, and accept the obligations of registered agent.

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, 2002 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 ☐ Delete  
 NAME **CD**  
 STREET ADDRESS **EATMAN, ROGER**  
 CITY-ST-ZIP **30941 SUNEAGLE DRIVE**  
**MT. DORA FL 32757-9784**

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

TITLE ☐ Delete  
 NAME **PD**  
 STREET ADDRESS **BANNON, GEORGE**  
 CITY-ST-ZIP **30941 SUNEAGLE DRIVE**  
**MT. DORA FL 32757-9784**

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

TITLE ☐ Delete  
 NAME **VAS**  
 STREET ADDRESS **RICHARDS, BRIAN**  
 CITY-ST-ZIP **30941 SUNEAGLE DRIVE**  
**MT. DORA FL 32757-9784**

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

TITLE ☐ Delete  
 NAME **VAS**  
 STREET ADDRESS **WOLF, DAN**  
 CITY-ST-ZIP **30941 SUNEAGLE DRIVE**  
**MT. DORA FL 32757-9784**

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

TITLE ☐ Delete  
 NAME **S**  
 STREET ADDRESS **TABOR, WILLIAM E JR.**  
 CITY-ST-ZIP **30941 SUNEAGLE DRIVE**  
**MT. DORA FL 32757-9784**

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

TITLE ☐ Delete  
 NAME **T**  
 STREET ADDRESS **MULLINS, WILLIAM P**  
 CITY-ST-ZIP **30941 SUNEAGLE DRIVE**  
**MT. DORA FL 32757-9784**

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:**

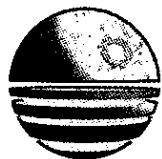
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**TABOR, JR. SECRETARY 7-2-02 352.735.1800**

Date

Daytime Phone #

CR2E034 (4/02)



**HANDEX<sup>®</sup>**  
Practical Environmental Solutions

Attachment  
Dr. # F00000007022

974411

August 12, 2002

Florida Dept of State  
Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

RE: Handex of the Carolinas, Inc.

To Whom It May Concern:

I have enclosed the UBR for Handex of the Carolinas, Inc. along with a check for \$150.00

Upon phoning the Department of State, the clerk informed me to send in the UBR along with a letter indicating the specific reason for late filing and asking that the late fee be waived. I previously had sent in a letter, but was not specific enough as to why the report was late.

We have no record of receiving the UBR for Handex of the Carolinas, Inc., therefore were unable to file timely. Please accept my apologies and waive the late fee.

I appreciate your consideration in this matter.

Sincerely,

Brooke Williams