

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F01000006546

1. Entity Name **Linear Coaters, Inc.**

FILED

02 NOV 21 PM 12:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**P.O. Box 395**

3. Mailing Address  
**2825 Breckinridge Blvd.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
**Suite 100**

DO NOT WRITE IN THIS SPACE

City & State  
**Midland, GA**

City & State

4. FEI Number  
**58-265-9069**

Applied For  
☒ Not Applicable

Zip  
**31820**

Country  
**USA**

Zip  
**30096**

Country  
**USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
**Bill Bailey**

Street Address (P.O. Box Number is Not Acceptable)  
**1419 NW 65th Avenue**

City **Ft. Lauderdale** **FL** Zip Code  
**33313**

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 **N/A**

Signature, typed or printed name of registered agent and title if applicable.

(Note: Key Person 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) ☐

**January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25**

**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**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**Chief Executive Officer  
Bradford J. Raffensperger  
10335 Belladrum  
Alpharetta, GA 30022**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**000009150330  
11/21/02--01064--016 \*\*61.25**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**Chief Financial Officer  
Bradford J. Raffensperger  
10335 Belladrum  
Alpharetta, GA 30022**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**Secretary  
Jim F. Stokes, Jr.  
7701 Chattsworth Road  
Columbus, GA 31820**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Bradford J. Raffensperger*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

770-921-5500

11/14/02

DATE

Daytime Phone #

**Bradford J. Raffensperger, CEO**

CR2E034B (12/01)