

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State
 04-04-2001 90060 043 ***150.00

0052383

DOCUMENT # F21416

1. Entity Name

AMERICAN RESOURCE SERVICES, INC.

Principal Place of Business

**5090 PARKRIDGE CT
 OVIEDO FL 32765**

Mailing Address

**5090 PARKRIDGE CT
 OVIEDO FL 32765**

A0042258



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1755 CEDAR HILL ROAD

Suite, Apt. #, etc.

3. Mailing Address

1755 CEDAR HILL ROAD

Suite, Apt. #, etc.

City & State

LANCASTER, OH

City & State

LANCASTER, OH

4. FEI Number

59-2066689

Applied For

Not Applicable

Zip

43130

Country

Zip

43130

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**WILLIAMS, WAYNE M
 5090 PARKRIDGE CT
 OVIEDO FL 32765**

7. Name and Address of New Registered Agent

Name

~~M. WAYNE WILLIAMS~~ STUART A. MEIKLE

Street Address (P.O. Box Number is Not Acceptable)

3291 LAKE ANDERSON AVE.

City

ORLANDO

FL

Zip Code

32812

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 **STUART A. MEIKLE**

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

(NOTE: Registered Agent Signature required when reinstating)

4/11/01

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 \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILLIAMS, M WAYNE 5090 PARKRIDGE CT OVIEDO FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILLIAMS, M WAYNE 1755 CEDAR HILL ROAD LANCASTER, OH 43130	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: **M. WAYNE WILLIAMS M. Wayne Williams (Pres)** **3/28/01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)