## 2002 Uniform Business Report (UBR)

## Mar 14, 2002 8:00 am DOCUMENT # F34637 **Secretary of State** 1. Entity Name 03-14-2002 90409 001 \*\*\*300 00 ALL AMERICAN FOOD EQUIPMENT SYSTEMS, INC. Principal Place of Business Mailing Address 3210 WINTER LAKE ROAD 3210 WINTER LAKE ROAD UNIT 1 UNIT 1 LAKELAND FL 33803 LAKELAND FL 33803 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2364280 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BLANTON, J. ROGER** Street Address (P.O. Box Number is Not Acceptable) 3210 WINTER LAKE RD, UNIT 1 SUITE 200 LAKELAND FL 33803 City 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 \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition CR2E034 (9/01 TITLE TITLE □ Delete FARNSWORTH, LEE NAME NAME STREET ADDRESS STREET ADDRESS 121 SHADOW LANE CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL ☐ Delete TITLE Change ☐ Addition **CPD** TITLE NAME NAME BLANTON, J. ROGER STREET ADDRESS 3210 WINTER LAKE ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME: HOMAN, PETE C STREET ADDRESS STREET ADDRESS 16840 98TH WAY CITY-ST-ZIP CITY-ST-ZIP Jupiter Fl 33478 ☐ Delete ☐ Change ☐ Addition TITLE NAME **BLANTON, C. CAREY** STREET ADDRESS STREET ADDRESS 4905 HANCOCK LAKE RD CITY-ST-ZIP LAKELAND FL 33813 CITY-ST-ZIP □ Change ☐ Delete ☐ Addition TITLE NAME ENLOW, WILLIAM G STREET ADDRESS 7280 MILLBROOK OAKS DRIVE STREET ADDRESS CITY-ST-ZIP LAKELAND FL 33813-6344 CITY-ST-ZIP VICE PRESIDENT RICHARD H. BLANTON Change X Addition TITLE ☐ Delete TITLE NAME NAME PARK LANE STREET ADDRESS STREET ADDRESS MADISON, GEORGIA 30650 CITY-ST-7IP 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 RETARY TREASUER 2-26-2002

Date

863 665-1472

Daytime Phone #