

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 27, 2003 8:00 am**  
**Secretary of State**

02-27-2003 90137 018 \*\*\*150.00

**DOCUMENT # F92000000699**

1. Entity Name

**TURBINE TECHNOLOGY SERVICES CORPORATION**



Principal Place of Business

**3050 TECHNOLOGY PKWY  
SUITE 100  
ORLANDO FL 32826  
US**

Mailing Address

**3050 TECHNOLOGY PKWY  
SUITE 100  
ORLANDO FL 32826  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

**14-1664793**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

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

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
	SVP	THORNTON, ANTHONY	3050 TECHNOLOGY PKWY ORLANDO FL 32826	<input type="checkbox"/>		PRESIDENT	GRAMATIKAS, GEORGE F	3050 TECHNOLOGY PKWY ORLANDO FL 32826	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	SVP	GRAMATIKAS, GEORGE F	3050 TECHNOLOGY PKWY. ORLANDO FL 32826	<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	PD	LEWIS, TOM	3050 TECHNOLOGY PKWY ORLANDO FL 32826	<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	SD	CHANCE, STEVE	3050 TECHNOLOGY PKWY ORLANDO FL 32826	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	ASD	SCHWARTZ, JOAN	3050 TECHNOLOGY PKWY ORLANDO FL 32826	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	TD	BYRNE, TOM	3050 TECHNOLOGY PKWY. ORLANDO FL 32826	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

CR2E034 (10/02)

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 607, 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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #