

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000000964

1. Entity Name

SHAW AERO DEVICES, INC.

FILED
Apr 23, 2000 8:00 am
Secretary of State

04-23-2000 90032 044 ***158.75

Principal Place of Business

Mailing Address

12291 TOWNE LAKE DR
FT MYERS FL 33913
US

12291 TOWNE LAKE DR
FT MYERS FL 34117-8408
US

2. Principal Place of Business

3. Mailing Address

3580 SHAW Blvd
Suite, Apt. #, etc.

3580 SHAW Blvd
Suite, Apt. #, etc.

City & State

City & State

Naples FL

Naples FL

Zip

Country

Zip

Country

34117-8408 Collier

34117-8408 Collier

4. FEI Number

11-1951406

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

D'ADDIO, LORNA H
12291 TOWNE LAKE DR.
FT. MYERS FL 33913

Name

D'Addio, LORNA H.

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

3580 SHAW Blvd.

City

Naples

FL

Zip Code

34117-8408

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

Lorna H. D'Addio LORNA H D'ADDIO

4/13/00

DATE

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

(NOTE: Registered Agent signature required when reinstating)

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PCD ☐ Delete
NAME SHAW, JAMES R
STREET ADDRESS 12291 TOWNE LAKE DR
CITY-ST-ZIP FT MYERS FL

TITLE VP ☐ Change ☒ Addition
NAME Robert D. Patton
STREET ADDRESS 3580 SHAW Blvd
CITY-ST-ZIP Naples FL 34117-8408

TITLE V ☒ Delete
NAME CROUSE, RICHARD
STREET ADDRESS 12291 TOWNE LAKE DR
CITY-ST-ZIP FT MYERS FL

TITLE PCD ☒ Change ☐ Addition
NAME SHAW, JAMES R.
STREET ADDRESS 3580 SHAW Blvd
CITY-ST-ZIP Naples, FL 34117-8408

TITLE VD ☐ Delete
NAME SHAW, FRANCIA
STREET ADDRESS 12291 TOWNE LAKE DR
CITY-ST-ZIP FT MYERS FL

TITLE VD ☒ Change ☐ Addition
NAME SHAW, FRANCIA
STREET ADDRESS 3580 SHAW BLVD
CITY-ST-ZIP Naples FL 34117-8408

TITLE V ☒ Delete
NAME CLINE, JAMES
STREET ADDRESS 12291 TOWNE LAKE DR
CITY-ST-ZIP FT MYERS FL

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

TITLE V ☐ Delete
NAME DRISCOLL, JAMES
STREET ADDRESS 12291 TOWNE LAKE DR
CITY-ST-ZIP FT MYERS FL

TITLE V ☒ Change ☐ Addition
NAME Driscoll, JAMES
STREET ADDRESS 3580 SHAW Blvd
CITY-ST-ZIP Naples FL 34117-8408

TITLE V ☐ Delete
NAME DOWNES, DENNIS
STREET ADDRESS 12291 TOWNE LAKE DR
CITY-ST-ZIP FT MYERS FL 33913

TITLE V ☒ Change ☐ Addition
NAME DOWNES, DENNIS
STREET ADDRESS 3580 SHAW Blvd
CITY-ST-ZIP Naples, FL 34117-8408

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:

Dennis Downes UP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-00

Date

Daytime Phone #