

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000000112

1. Entity Name

SUPER VISION INTERNATIONAL, INC.

FILED
Jul 19, 2001 8:00 am
Secretary of State

07-19-2001 90234 038 ***550.00

Principal Place of Business

Mailing Address

8210 PRESIDENTS DR
 ORLANDO FL 32809
 US

8210 PRESIDENTS DR
 ORLANDO FL 32809
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3046866**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ \$3.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CALISE, LARRY J
 8210 PRESIDENTS DR
 ORLANDO FL 32809

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.

SIGNATURE

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

(NOTE: Registered 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) ☐

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 CD
 KINGSTONE, BRETT M
 8210 PRESIDENTS DR
 ORLANDO FL 32809 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 PROTIVA, ERIC
 8210 PRESIDENTS AVE
 ORLANDO FL 32809 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 PROTIVA, EDGAR
 8210 PRESIDENTS DR
 ORLANDO FL 32809 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 MCCANN, BRIAN
 8210 PRESIDENTS DR
 ORLANDO FL 32809 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PS
 STANNEY, JOHN P
 8210 PRESIDENTS DR
 ORLANDO FL 32809 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Chief Financial Officer
 Calise, Larry J.
 8210 Presidents Dr
 Orlando, FL 32809 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 ANTHONY CASTOR
 8210 PRESIDENTS DR
 32809DO FL ☐ Delete

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: *Larry J. Calise* CFO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/21/01 (407) 857-9900