

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F94000000584**

1. Entity Name

PRATT & WHITNEY ENGINE SERVICES, INC.

FILED
Jun 22, 2000 8:00 am
Secretary of State

06-22-2000 90049 036 ***550.00

Principal Place of Business BENEDUM INDUSTRIAL PK RT 3 BOX 16 BRIDGEPORT WV 26330 US	Mailing Address 1525 MIDWAY PARK RD BRIDGEPORT WV 26330-9688 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 8440 TRADEPORT DRIVE Suite, Apt. #, etc. SUITE 105 City & State ORLANDO, FL Zip 32827 Country US	3. Mailing Address Suite, Apt. #, etc. City & State City & State Zip Country
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4. FEI Number 55-0521794	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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.
 SIGNATURE _____ (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, 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GAUDETTE, GILBERT ROUTE 3 BOX 16 BRIDGEPORT WV 26330	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ATHERTON, JON ROUTE 3 BOX 16 BRIDGEPORT WV 26330	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ADAMS, T M RT. 3, BOX 16 BRIDGEPORT WV 26330	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT PROCOPIO, N RT 3 BOX 16 BRIDGEPORT WV	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PASCO, CJC RT. 3, BOX 16 BRIDGEPORT WV 26330	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEERS, R F RT. 3, BOX 16 BRIDGEPORT WV 26330	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1525 MIDWAY PARK ROAD
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1525 MIDWAY PARK ROAD
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition S FUNK, M. 1525 MIDWAY PARK ROAD BRIDGEPORT, WV 26330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition AT FRAZIER, K 1525 MIDWAY PARK ROAD BRIDGEPORT, WV 26330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1525 MIDWAY PARK ROAD
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1525 MIDWAY PARK ROAD

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: _____ DATE: **6-14-00** DAYTIME PHONE #: **304/842-1314**