2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State
02-07-2002 90030 017 ***150.00

DOCUMENT # F94000001693

1. Entity Name
WIEKER ENTERPRISES, INC.

Principal Place of Business	Mailing Address
1821 M 3/4 ROAD FRUITA CO 81521 US	1821 M 3/4 ROAD FRUITA CO 81521 US

BU018534

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1250 SEMINOLE BLVD.	P.O. Box 958
Suite, Apt. #, etc.: SUITE #1	Suite, Apt. #, etc.:
City & State: LARGO, FL	City & State: LARGO, FL
Zip: 33770 Country: USA	Zip: 33779 Country: USA

4. FEI Number: 84-0505776 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BAILEY, PENNY J
C/O WINIFRED WIEKER
1581 GULF BOULEVARD APT 601
CLEARWATER FL 34630

7. Name and Address of New Registered Agent

Name: ROBERT M. JAMES
Street Address (P.O. Box Number is Not Acceptable): 1250 SEMINOLE BLVD., SUITE 1
City: LARGO FL Zip Code: 33770

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: Robert M James ROBERT M JAMES, 1/18/02
(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, 2002 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	D WIEKER, ROBERT E 1581 GULF BLVD. #601 CLEARWATER FL 34630	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BAILEY, PENNY JEAN 1821 M 3/4 RD. FRUITA CO	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President BAILEY, PENNY J 335 LA HACIENDA DR. IND. ROCKS BCH, FL 33785 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JAMES, ROBERT M 1785 SUNSET POINT RD CLEARWATER FL 33755	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary, Treasurer JAMES, ROBERT M 12151 93rd ST N LARGO FL 33773 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BAILEY, JAMES L 1821 M 3/4 ROAD FRUITA CO 81521	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BAILEY, JAMES L 335 LA HACIENDA DR IND. ROCKS BCH FL 33785 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GERSON, MELISSA A 1821 M 3/4 ROAD FRUITA CO 81521	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GERSON, MELISSA A 2605 S. LAREDO CT. AURORA, CO 80013 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP JAMES, AMANDA J 1785 SUNSET POINT RD CLEARWATER FL 33755	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP JAMES, AMANDA J 12151 93rd ST N LARGO, FL 33773 ☒ Change ☐ Addition

CR2E034 (9/01)

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: Robert M James SIGNATURE REQUIRED ROBERT M JAMES, 1/18/02 (727) 585 8623
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #