

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90128 038 ***150.00

DOCUMENT # F95000002797

1. Entity Name

APPLEWAY EQUIPMENT LEASING, INC.

Principal Place of Business

**8520 E SPRAGUE AVE.
SPOKANE WA 99212**

Mailing Address

**PO BOX 13098
SPOKANE WA 99213**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

91-0980203

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DC
PRING, TIMOTHY S
2819 S. PARK LANE
SPOKANE WA 99212** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVCP
PRING, BRADLEY T
911 E. RIVERSIDE HARBOR DR.
POST FALLS ID 83854** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
OWSLEY, KIRK M
12707 N MUZZY RD
NEWMAN LAKE WA** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
KLOTZ, MICHAEL R
W 2005 TONI RAE
SPOKANE WA 99218** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Pring, Karen L. VP
2819 S. Park Lane
Spokane, WA 99212** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Secretary
Peterson, John T.
7923 S. Cedar Rd.
Spokane, WA 99224** ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR. President ☒ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Dir. V. President ☒ Change ☐ Addition

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

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bradley T. Pring President 01-11-01 509-927-1288

Date

Daytime Phone #

CR2E034 (9/01)