

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90305 041 ***150.00

DOCUMENT # F96000005329

1. Entity Name

MOBILE CONSULTANTS, INC.

Principal Place of Business

**111 GLANORGAN AVE
ALLIANCE OH 44601
US**

Mailing Address

**111 GLANORGAN AVE
ALLIANCE OH 44601
US**

2. Principal Place of Business

111 Glamorgan Ave.

Suite, Apt. #, etc.

3. Mailing Address

111 Glamorgan Ave.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

34-1831194

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

**LEXIS DOCUMENT SERVICES, INC.
3953 WW KELLY RD.
TALLAHASSEE FL 32311**

Name

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

City

State

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 PD ☐ Delete
NAME MEEK, JEFFREY E
STREET ADDRESS 111 GLAMORGAN AVE
CITY-ST-ZIP ALLIANCE OH 44601

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

TITLE SRV ☐ Delete
NAME HALL, STEVEN
STREET ADDRESS 111 GLAMORGAN AVE
CITY-ST-ZIP ALLIANCE OH 44601

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

TITLE SRVD ☐ Delete
NAME RUNG, DARRELL
STREET ADDRESS 111 GLAMORGAN AVE
CITY-ST-ZIP ALLIANCE OH 44601

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

TITLE SRV ☐ Delete
NAME JAMES, RONALD III
STREET ADDRESS 111 GLAMORGAN AVE
CITY-ST-ZIP ALLIANCE OH 44601

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

TITLE CSD ☐ Delete
NAME WORKMAN, ROBERT
STREET ADDRESS 111 GLAMORGAN AVE
CITY-ST-ZIP WOOSTER OH 44691

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

TITLE T ☐ Delete
NAME ZELENKA, JOHN
STREET ADDRESS 111 GLAMORGAN AVE
CITY-ST-ZIP WOOSTER OH 44691

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

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:

JEFFREY E. MEEK, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-01

Date

800-824-7508

Daytime Phone #