

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2002 8:00 am
Secretary of State

07-31-2002 90104 005 ***150.00

DOCUMENT # F96000006329

1. Entity Name

R. G. TECHNICAL ASSOCIATES, INC.

Principal Place of Business

**50 GOLF VILLA DR.
 PORT ORANGE FL 32129
 US**

Mailing Address

**PO BOX 290941
 PORT ORANGE FL 32129
 US**

80132996



DO NOT WRITE IN THIS SPACE

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

56-1493565

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

**GERSTENBERGER, ROLAND W
 50 GOLF VILLA DR.
 PORT ORANGE FL 32124**

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
 After September 13, 2002 Fee will be \$750.00
 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	DCP GERSTENBERGER, ROLAND W 50 GOLF VILLA DR PORT ORANGE FL 32124 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCST GERSTENBERGER, JOHANNA M 50 GOLF VILLA DR. PORT ORANGE FL 32124 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GERSTENBERGER, STEVEN R 50 GOLF VILLA DR PORT ORANGE FL 32124 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDERSON, ELICE J 738 WILLOW CR. STREET ORANGE CITY FL 32763 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (4/02)

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

6/22/02

Date

Daytime Phone #

Attachment
#F 960000006324

R. G. Technical Associates, Inc.

Business Services, Consultants

P.O. Box 290941

Port Orange, FL 32129

(386) 761-5094 / Fax: (386) 322-8273

July 22nd 2002

Florida Division of State

Division of Corporations

Uniform Business Filings

P.O.Box 1500

Tallahassee, Florida 32302-1500

Re. Uniform Business Report 2002

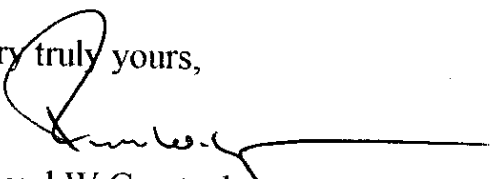
To whom it may concern,

We are enclosing our Uniform Business Report for 2002 with our check for \$ 150.00.

Due to a recent move we had did not receive the filing forms until recently. We respectfully request a waiver of the \$400 late fee. As your records will show we have filed timely in the previous years. As a small corporation and under the current economic situation the late fee represents a big amount.

Your consideration and understanding of this matter is highly appreciated.

Very truly yours,



Roland W. Gerstenberger, Pres.