

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000001075

1. Entity Name

ELLIOTT ENERGY SYSTEMS, INC.

FILED

Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90082 043 ***150.00

Principal Place of Business

Mailing Address

2901 SE MONROE ST
STUART FL 34997
US

2901 SE MONROE ST
STUART FL 34997-5995
US

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 25-1798393

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

MCCARTHY, TERENCE P
MCCARTHY, SUMMERS, BOBKO, MCKEY, WOOD & SA
2081 E OCEAN BLVD 2ND FLR
STUART FL 34996

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S
NAME COX, WILLIAM
STREET ADDRESS ELLIOT COMP, 901 N 4TH ST
CITY-ST-ZIP JEANNETTE PA 15644 ☐ Delete

TITLE DCFD
NAME GREECE, RICHARD G
STREET ADDRESS 2901 SE MONROE ST
CITY-ST-ZIP STUART FL 34997 ☐ Delete

TITLE DP
NAME BURNHAM, DOUGLAS R
STREET ADDRESS 2901 SE MONROE ST
CITY-ST-ZIP STUART FL 34997 ☐ Delete

TITLE T
NAME BRENZIA, JOHN
STREET ADDRESS ELLIOT COMP, 901 N 4TH ST
CITY-ST-ZIP JEANNETTE PA 15644 ☐ Delete

TITLE CD
NAME ASSARD, DAVID
STREET ADDRESS ELLIOT COMP, 901 N 4TH ST
CITY-ST-ZIP JEANNETTE PA 15644 ☐ Delete

TITLE D
NAME RASSMANN, FRANK
STREET ADDRESS ELLIOTT COMP, 901 N. 4TH ST
CITY-ST-ZIP JEANNETTE PA 15644 ☐ Delete

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-7-00

561-219-9449 x105

CR2E034 (9/99)