## **2001 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** Feb 01, 2001 8:00 am Secretary of State DOCUMENT # **F9800005049** UNISON INDUSTRIES, INC. 02-01-2001 90133 039 \*\*\*150.00 Principal Place of Business Mailing Address 7575 BAYMEADOWS WAY 7575 BAYMEADOWS WAY JACKSONVILLE FL 32256 JACKSONVILLE FL 32256 2. Principal Place of Business 3. Mailing Address -Suite, Apt. #, etc. ---Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3530410 Not Applicable Zip Country Country **\$8.75** Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SONTAG, FREDERICK B Street Address (P.O. Box Number is Not Acceptable) 7575 BAYMEADOWS WAY JACKSONVILLE FL 32256 Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 11. PD Addition TITLE TITLE Change ☐ Delete SONTAG, FREDERICK B NAME NAME STREET ADDRESS 7575 BAYMEADOWS WAY STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP Change ☐ Addition ☐ Detete TITLE TITLE MOTTIER, BRADLEY D NAME NAME 7575 BAYMEADOWS WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP ATS Change Addition TITLE ☐ Delete TITLE SONTAG, SUSAN T NAME NAME 7575 BAYMEADOWS WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE GREGORY, CHARLES R JR NAME NAME STREET ADDRESS '7575' BAYMEADOWS' WAY STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32256 Change ☐ Addition TITLE ☐ Delete TITLE RYAN, DANIEL M NAME NAME 7575 BAYMEADOWS WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 33256 ☐ Change ☐ Addition TITLE ☐ Delete TITLE OPPLIGER, OTTO NAME NAME 7575 BAYMEADOWS WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 33256 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.

R. GREGORY

SIGNATURE AND TYPED OR PRINTED NAME OF STANING OFFICER OR DIRECTOR

SIGNATURE: