

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 17, 2002 8:00 am**  
**Secretary of State**

02-17-2002 90051 033 \*\*\*158.75

**DOCUMENT # G65508**

1. Entity Name

**SCHWARTZ ELECTRO-OPTICS, INC.**

Principal Place of Business

**3404 N. ORANGE BLOSSOM TR.  
 ORLANDO FL 32804**

Mailing Address

**3404 N. ORANGE BLOSSOM TR.  
 ORLANDO FL 32804**

2. Principal Place of Business

3. Mailing Address

**8337 South Park Circle**

**8337 South Park Circle**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Bldg 500**

**Bldg 500**

City & State

City & State

**Orlando, FL**

**Orlando FL**

Zip

Zip

**32819**

Country

**32819**

Country

4. FEI Number

**59-2360587**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCHWARTZ, W.C.**

**3404 N. ORANGE BLOSSOM TR.  
 ORLANDO FL 32804**

Name

**Sellers, James M**

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

**8337 South Park Circle Bldg 500**

City

**Orlando, FL**

FL

Zip Code

**32819**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**AST**  
**ANDERSON, ALBERT P** ☒ Delete  
**103 BLACK CHERRY CT**  
**WINTER SPRINGS FL 32708**

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**Assistant Secretary & Treasurer** ☐ Change ☒ Addition  
**Amici, Carmen A.**  
**404 Abbeyridge Ct.**  
**Orlando, FL 32761**

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**P**  
**SELLERS, JAMES M** ☐ Delete  
**500 MELROSE AVENUE**  
**WINTER PARK FL 32789**

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**Sellers, James M.** ☒ Change ☐ Addition  
**322 E. Central Blvd #1602**  
**Orlando, FL 32801**

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D**  
**KELLEY, DARRELL** ☐ Delete  
**1018 TEMPLE GROVE**  
**WINTER PARK FL 32789**

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**S**  
**WARD, HAROLD A., III** ☐ Delete  
**2150 FAWSETT ROAD**  
**WINTER PARK FL**

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D**  
**WANGLER, RICHARD J** ☐ Delete  
**2450 DERBYSHIRE RD**  
**MATTLAND FL 32751**

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D**  
**SWARTZ, PATRICIA** ☐ Delete  
**500 MELROSE STREET**  
**WINTER PARK FL 32789**

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

Date

Daytime Phone #

**1-28-02**

**407-298-1802**

CR2E034 (9/01)