

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 02, 2002 8:00 am
Secretary of State

DOCUMENT # **G 88125**

07-02-2002 90812 047 ***550.00

1. Entity Name

AUTOMATION INNOVATORS, INC.

DO NOT WRITE IN THIS SPACE

80126703

2. Principal Place of Business

5975 CATTLEMEN LANE

Suite, Apt. #, etc.

3. Mailing Address

5975 CATTLEMEN LANE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

SARASOTA, FL

City & State

SARASOTA, FL

4. FEI Number

59-2416061

Applied For

Not Applicable

Zip

34232

Country

USA

Zip

34232

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name **WINSLER, ROBERT J.**

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

1351 QUAIL RUN TRAIL

City

SARASOTA

FL

Zip Code

34232

**DO NOT WRITE
IN THIS SPACE**

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) ☐

January 1 - May 1, Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE	S
NAME	WINSLER, PEGGY
STREET ADDRESS	1351 QUAIL RUN TRAIL
CITY - ST - ZIP	SARASOTA, FL 34239
TITLE	DP
NAME	WINSLER, ROBERT J. JR
STREET ADDRESS	1351 QUAIL RUN TRAIL
CITY - ST - ZIP	SARASOTA, FL 34239
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
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CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE

Robert J. Winsler, Jr. **6-28-02** **941 926 0950**

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)