

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H88852

1. Entity Name

MITCHELL ENGINEERING, INC.

FILED
Feb 07, 2000 8:00 am
Secretary of State

02-07-2000 90050 014 ***150.00

Principal Place of Business

Mailing Address

2111 S. TAMiami TRAIL
OSPREY FL 34229

2111 S. TAMiami TRAIL
OSPREY FL 34240-7802

2. Principal Place of Business

3. Mailing Address

1885-A Porter Lake Dr.

1885-A Porter Lake Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sarasota, FL

City & State

Sarasota, FL

Zip

34240

Country

U.S.A.

Zip

34240

Country

U.S.A.

4. FEI Number

59-2616668

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LINDA C. MAHONEY
2015 TOCOBAGA LANE
NOKOMIS FL 34275

7. Name and Address of New Registered Agent

Name

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

7958 Royal Birkdale Cir.

City

BRADENTON

FL

Zip Code

34202

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

TITLE PT
NAME MAHONEY, THOMAS M.
STREET ADDRESS 7958 ROYAL BIRKDALE CIR
CITY-ST-ZIP BRADENTON FL 34202 ☐ Delete

TITLE VS
NAME MAHONEY, LINDA C.
STREET ADDRESS 7958 ROYAL BIRKDALE CIR
CITY-ST-ZIP BRADENTON FL 34202 ☐ Delete

TITLE V
NAME MAHONEY-JR, THOMAS M
STREET ADDRESS 1145 DEER HOLLOW PL
CITY-ST-ZIP SARASOTA FL 34232 ☐ Delete

TITLE V
NAME DELLINGER, JOSEPH M
STREET ADDRESS 2516 VALENCIA DR
CITY-ST-ZIP SARASOTA FL 34-2396 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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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 #

2/8/00 941-318-7500