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

## Apr 24, 2001 8:00 am Secretary of State **DOCUMENT # K09305** BOBCAT OF ORLANDO, INC. 04-24-2001 90073 001 \*\*\*476.25 Principal Place of Business Mailing Address % RICHARD G. KINGSCAND \* RICHARD G. KINGSLAND 38376 7410 E. COLONIAL DR. 7410 E. COLONIAL DR. ORLANDO FL 32807 ORLANDO FL 32807 2. Principal Place of Business 74/0 SAST 3. Mailing Address 7410 EAST COLONIAL Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2860419 IANBO MANDE Not Applicable Country USA \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent K: NGS/AND KINGSLAND, RICHARD G. Street Address (P.O. Box Number is Not Acceptable) 7410 E. COLONIAL DR. ORLANDO FL 32807 EAST COLONIAL DR 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. (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 11. CR2E034 (10/00) TITLE ☐ Change Addition TITLE NAME KINGSLAND, RICHARD G. NAME STREET ADDRESS STREET ADDRESS 4131 ALDERGATE CITY-ST-ZIP CITY-ST-ZIP WINTER SPRINGS FL 33708 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME KINGLAND, RICHARD A NAME STREET ADDRESS STREET ADDRESS 889 WILLOW RUN LANE CITY-ST-ZIP CITY-ST-ZIP WINTER SPRINGS FL 32708 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

Richard A. Kingsland