

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 22, 2001 08:00 AM**
Secretary of State**DOCUMENT # K69186**1. Entity Name
PRESSLER & ASSOCIATES, INCORPORATED**Principal Place of Business**% DONALD L. PRESSLER
505 EMBERWOOD DR
BRANDON
33511

FL

Mailing Address% DONALD L. PRESSLER
505 EMBERWOOD DR
BRANDON
33511

FL

2. Principal Place of Business

% DONALD L. PRESSLER

3. Mailing Address

% DONALD L. PRESSLER

Suite, Apt. #, etc.

2212 GLEN MIST DRIVE

Suite, Apt. #, etc.

2212 GLEN MIST DRIVE

City & State

VALRICO

FL

City & State

VALRICO

FL

Zip

33594

Country

Zip

33594

Country

4. FEI Number**65-0099516**

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**PRESSLER, DONALD L.**
505 EMBERWOOD DR**BRANDON**

33511

FL

7. Name and Address of New Registered Agent

Name

PRESSLER, DONALD L.

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

2212 GLEN MIST DRIVE

City

VALRICO

FL

Zip Code

33594

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)

01/22/2001

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, 2001 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 D ☐ Delete
NAME **PRESSLER, DONALD L.**
STREET ADDRESS **505 EMBERWOOD DR**
CITY-ST-ZIP **BRANDON FL**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE D ☒ Change ☐ Addition
NAME **PRESSLER, DONALD L.**
STREET ADDRESS **2212 GLEN MIST DRIVE**
CITY-ST-ZIP **VALRICO FL 33594**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
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.

SIGNATURE: Donald L. Pressler

Pres

01/22/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)