## 2002 UNIFORM BUSINESS REPORT (UBR)

CITY-ST-ZIP

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SIGNATURE:

## Feb 26, 2002 8:00 am DOCUMENT # K87626 **Secretary of State** 1. Entity Name 02-26-2002 90115 012 \*\*\*158.75 SAVANT ENGINEERING, INC. Principal Place of Business Mailing Address % DANIEL D. BAUMANN % DANIEL D. BAUMANN 155 HWY A1A APT, 206 155 HWY A1A APT, 206 SATELLITE BEACH FL 32937-2086 SATELLITE BEACH FL 32937-2086 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0136026 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAUMANN, DANIEL D. Street Address (P.O. Box Number is Not Acceptable) 155 HWY A1A APT. 206 SATELLITE BEACH FL 32937-2086 City Zip Code 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 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, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE TITLE Addition BAUMANN, DANIEL D. NAME NAME STREET ADDRESS 155 HWY A1A APT. 206 STREET ADDRESS CITY-ST-ZIP SATELLITE BEACH FL 32937-2086 CITY-ST-ZIP TITLE TD Delete TITLE [] Change Addition NAME BAUMANN, DANIEL D. NAME STREET ADDRESS STREET ADDRESS 155 HWY A1A APT. 206 CITY-ST-ZIP SATELLITE BEACH FL 32937-2086 CITY-ST-ZIP TITLE Delete \_TITLE ☐1 Change Addition NAME **ELEANOR BAUMANN** NAME STREET ADDRESS STREET ADDRESS 1711 DAYTONIA RD. CITY-ST-ZIP CITY-ST-ZIP MIAMI BCH FL TITLE ☐ Delete TITLE [1] Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP [] Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition 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