

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90104 032 ****50.00

DOCUMENT # L00000009336

1. Entity Name

AUTOMATED FUEL TECHNOLOGIES LLC



Principal Place of Business

5371 NW 33RD AVE.
SUITE 205
FORT LAUDERDALE FL 33309

Mailing Address

5371 NW 33RD AVE.
SUITE 205
FORT LAUDERDALE FL 33309

2. Principal Place of Business

1900 SKEES ROAD

3. Mailing Address

1900 SKEES ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WEST PALM BEACH

City & State

WEST PALM BEACH

Zip

33411

Country

USA

Zip

33411

Country

USA

4. FEI Number

65-1032193

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCCALLUM, KINGSLEY A III
5371 NW 33RD AVE.
SUITE 205
FORT LAUDERDALE FL 33309

Name

Kingsley A. McCallum III

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

1900 SKEES RD

City

West Palm Beach

FL

Zip Code

33411

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. I am familiar with, and accept the obligations of registered agent.

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 \$50.00

Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
MCCALLUM, KINGSLEY A JR.
5371 NW 33RD AVE.
FORT LAUDERDALE FL 33309

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
COCKSHUTT, TIMOTHY G
5371 NW 33RD AVE.
FORT LAUDERDALE FL 33309

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
GARRETT, TATE A
5371 NW 33RD AVE.
FORT LAUDERDALE FL 33309

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
BUFFINGTON, NED B
5371 NW 33RD AVE.
FORT LAUDERDALE FL 33309

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: **KINGSLEY A. MCCALLUM III**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2/7/03

Date

Daytime Phone #

CR2E083 (10/02)