

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L24527

FILED
Apr 15, 2002 8:00 AM
Secretary of State

Entity Name: AMERIKOTE ENTERPRISES, INC.

Current Principal Place of Business:

636 GRAMPIAN CRT
APOPKA, FL 32712

New Principal Place of Business:

Current Mailing Address:

636 GRAMPIAN CRT
APOPKA, FL 32712

New Mailing Address:

FEI Number: 59-2975146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARSON, BOB E III
636 GRAMPIAN CRT
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

PARSONS, BOB E III
636 GRAMPIAN CRT
APOPKA, FL 32712 US

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: BOB E. PARSONS III

04/15/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PARSON, BOB E III
Address: 636 GRAMPIAN CRT
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: PARSON, REBECCA I
Address: 636 GRAMPIAN CRT
City-St-Zip: APOPKA, FL 32712

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PARSONS, BOB E III
Address: 636 GRAMPIAN CRT
City-St-Zip: APOPKA, FL 32712

Title: D (X) Change () Addition
Name: PARSONS, REBECCA I
Address: 636 GRAMPIAN CRT
City-St-Zip: APOPKA, FL 32712

Title: V () Change (X) Addition
Name: BAILES, JAMES H
Address: 525 HARVARD PL
City-St-Zip: APOPKA, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BOB E. PARSONS III

D

04/15/2002

Electronic Signature of Signing Officer or Director

Date