

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90128 006 ***150.00

DOCUMENT # L90127

1. Entity Name
ARKANSAS BUS EXCHANGE CORPORATION

Principal Place of Business
12253 W COLONIAL DRIVE
WINTER GARDEN FL 34787
US

Mailing Address
12253 W COLONIAL DRIVE
WINTER GARDEN FL 34787
US

2. Principal Place of Business
1150 JETPORT DR
Suite, Apt. #, etc.

3. Mailing Address
1150 JETPORT DR.
Suite, Apt. #, etc.

City & State
ORLANDO, FL
Zip 32809 **Country** ORANGE

City & State
ORLANDO, FL
Zip 32809 **Country** ORANGE

4. FEI Number 59-3018790

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

OLESEN, STEVEN
12253 W COLONIAL DRIVE
WINTER GARDEN FL 34787

7. Name and Address of New Registered Agent

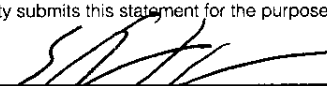
Name

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

1150 JETPORT DR.

City ORLANDO **FL** **Zip Code** 32809

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  **1-25-02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE ST ☐ Delete
NAME OLESEN, STEVEN
STREET ADDRESS 13201 OLESEN COURT
CITY-ST-ZIP CLERMONT FL 34711

TITLE P ☐ Delete
NAME OLESEN, DARLA
STREET ADDRESS 12252 VALENCIA DRIVE
CITY-ST-ZIP CLERMONT FL 34711

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME OLESEN, STEVEN
STREET ADDRESS 13201 OLESEN COURT
CITY-ST-ZIP CLERMONT, FL 34711

TITLE ST ☒ Change ☐ Addition
NAME OLESEN DARLA
STREET ADDRESS 12634 VALENCIA DR
CITY-ST-ZIP CLERMONT, FL 34711

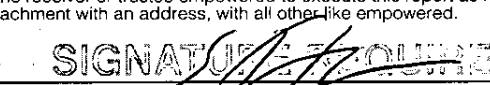
TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE ☐ 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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-02

Date Daytime Phone #

CR2E034 (9/01)