

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2001 8:00 am
Secretary of State

04-27-2001 90373 042 *****70.00

DOCUMENT # N00000001982

1. Entity Name
X-STATIC ENTERPRISES INC.

Principal Place of Business Mailing Address
450 SOUTH HWY 29 BOX 784 **PO BOX 784**
CANTONMENT FL 32533 **CANTONMENT FL 32533**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
1325 Commerce Drive **P.O. Box 462**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
Box 462

City & State City & State
Crestview, Florida **Crestview Florida**
 Zip Zip Country Country
32536 **32536** **U.S.A.** **U.S.A.**

4. FEI Number Applied For
- N/A - Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
RUSTAND, CARLYSE P
880 SOUTH VIRECENT ROAD
CANTONMENT FL 32533

7. Name and Address of New Registered Agent
 Name **CARLYSE P. RUSTAND**
 Street Address (P.O. Box Number is Not Acceptable)
450 South Highway 29
 City **CANTONMENT** FL Zip Code **32533**

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 *Carlyse P. Rustand* DATE **4/24/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees Make Check Payable to Department of State.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Director Jon Arthur Rustand 1325 Commerce Drive #462 Crestview Florida 32536 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Trustee Smitty Rustand 1325 Commerce Drive #462 Crestview, Florida 32536 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Trustee PEGGY C. RUSTAND 1325 Commerce Drive #462 Crestview, Florida 32536 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jon Arthur Rustand* **Jon Arthur Rustand** DATE **4/24/01** (309) 218-7778
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E037 (10/00)