

2000 UNIFORM BUSINESS REPORT (UBR)

5/

DOCUMENT # N12257

1. Entity Name

MID FLORIDA UTILITIES & TRANSPORTATION CONTRACTO

FILED
Jun 08, 2000 8:00 am
Secretary of State

Principal Place of Business

Mailing Address

300 N. COUNTY ROAD, SUITE 101
STE 101
LONGWOOD FL 32750
US

300 N. COUNTY ROAD, SUITE 101
STE 101
LONGWOOD FL 32750
US

2. Principal Place of Business

231 West Bay Avenue

3. Mailing Address

231 West Bay Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Longwood, FL 32750-4125

City & State

Longwood, FL 32750-4125

4. FEI Number

59-0796488

Applied For

Not Applicable

Zip
32750-4125

Country
Seminole

Zip
32750-4125

Country
Seminole

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KERSHNER, R. BRUCE
300 N COUNTY RD 427-STE 101
LONGWOOD FL 32750

Name

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

231 West Bay Avenue

City
Longwood

FL

Zip Code
32750-4125

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 \$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
D
BARE, KEN
2170 STATE ROAD 434 WEST, SUITE 130
LONGWOOD FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PP
BULLINGTON, RICH
990 MILLER DRIVE
ALTA MONTE SPRINGS FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President
Joe Raucci
172 West Fourth Street
Apopka, FL 32704 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
REED, CHUCK
590 FERGUSON DRIVE
ORLANDO FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
ERICKSON, DAVE
7285 ESTAPONE CIR
FERN PARK FL 32730 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Past President ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ETHERIDGE, SAM
3333 OLD WINTER GARDEN ROAD
ORLANDO FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
SHUMAN, DAVE
1936 LEE RD
WINTER PARK FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President ☒ Change ☐ Addition
LS

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David L. Shuman

David L. Shuman 4/25/2000

407/831-6010

Daytime Phone #