

9/13/01-90054-007-\$150.00-\$150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P0000009562**
 1. Entity Name
WILLIAM TREAT'S HEAVY EQUIPMENT & VEHICLE REPAIR

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

01 SEP 27 AM 9:10

Principal Place of Business Mailing Address
~~17057 RUSSELL AVE.~~ 17057 RUSSELL AVE.
~~PORT CHARLOTTE FL 33854~~ PORT CHARLOTTE FL 33854



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
23240 Harper Rd **23240 Harper Rd**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
Unit 4 + 5 **Unit 4 + 5**
 City & State City & State
Port Charlotte, FL **Port Charlotte, FL**
 Zip Country Zip Country
33980 **Charlotte** **33980** **Charlotte**

4. FEI Number Applied For
65-0974162 Not Applicable

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

6. Name and Address of Current Registered Agent
TREAT, WILLIAM
17057 RUSSELL AVE.
PORT CHARLOTTE FL 33854

7. Name and Address of New Registered Agent
 Name **Same as current agent**
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when releasing) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$550.00**
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

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

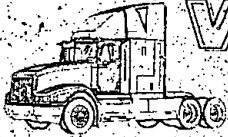
11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
OWNER William Treat 17057 Russell Ave Port Charlotte, FL 33952	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **William Treat** Date: **9/6/01** Office Phone # **(941) 335-2777**

0124830
CRS034 (6/01)



4055510 Attachment 04 20000095

William Treat's Heavy Equipment/ Vehicle Repair, Inc.

MAIN OFFICE

23240 Harper Road, Unit 4 & 5
Port Charlotte, FL 33980
941-235-2777

CORPORATE OFFICE

4055 Tamiama Trail, Ste 7
Port Charlotte, FL 33952
941-624-6887

Fax: 941-624-3805

September 6, 2001

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302

Re: Filing Fee

To Whom It May Concern:

Enclosed is a check for \$150.00 made payable to the Department of State. After contacting a representative via the telephone number that is printed on the front of the 2001 Uniform Business Report, we were instructed to send only \$150.00 and not the original amount of \$550.00 as we did not receive the first notice.

If this is incorrect or you require additional information, please do not hesitate to contact me at 941-235-2777.

Sincerely,

William Treat

William Treat
Owner

WT/ra