

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
 05-06-2002 90114 030 ***150.00

DOCUMENT # P00000033712

1. Entity Name

SOUTHLAND ENGINEERING GROUP, INC.

Principal Place of Business

**3250 BERMUDA ISLE CIR., #823
 NAPLES FL 34109**

Mailing Address

**3250 BERMUDA ISLE CIR., #823
 NAPLES FL 34109**

2. Principal Place of Business

3235 LA COSTA CIRCLE

3. Mailing Address

3235 LA COSTA CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

304

304

City & State

City & State

NAPLES, FL

NAPLES, FL

Zip

Country

Zip

Country

34105 USA

34105 USA

4. FEI Number

65-1001524

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

PHIPPS, MICHAEL T

**3250 BERMUDA ISLE CIR., #823
 NAPLES FL 34109**

**3235 LA COSTA CIRCLE #304
 NAPLES, FL 34105**

7. Name and Address of New Registered Agent

Name

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

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 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **CCEO** ☐ Delete
 NAME **ATIPPS, MICHAEL T**
 STREET ADDRESS **3250 BERMUDA ISLE CIRCLE #823**
 CITY-ST-ZIP **NAPLES FL 34109**

TITLE **P** ☐ Delete
 NAME **WILLIS, DANNY**
 STREET ADDRESS **10450 SHARRON DRIVE**
 CITY-ST-ZIP **FORT MYERS FL 33917**

TITLE **VP** ☐ Delete
 NAME **DOWLING, PHILIP**
 STREET ADDRESS **3240 BERMUDA ISLE CIRCLE #926**
 CITY-ST-ZIP **NAPLES FL 34109**

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 ☐ Change ☐ Addition
 NAME **PHIPPS, MICHAEL T**
 STREET ADDRESS **3235 La Costa Circle**
 CITY-ST-ZIP **# 304, Naples, FL, 34105**

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

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

TITLE ☐ Change ☐ Addition
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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

Date

Daytime Phone #

01-08-02 941-596-3572

CR2E034 (9/01)