

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 18, 2001 8:00 am**  
**Secretary of State**

05-18-2001 91584 007 \*\*\*150.00

**DOCUMENT #** 060000036241

1. Entity Name

MBA Capital, Inc.

Principal Place of Business

Mailing Address

3005 N. Ninth Avenue  
Pensacola, FL 32503

3005 N. Ninth Avenue  
Pensacola, FL 32503

2. Principal Place of Business  
4400 Bayou Blvd.

3. Mailing Address  
4400 Bayou Blvd.

Suite, Apt. #, etc.  
Suite 25-E

Suite, Apt. #, etc.  
Suite 25-E

City & state  
Pensacola, FL

City & State  
Pensacola, FL

4. FEI Number  
59-3640612

Applied For  
Not Applicable

Zip  
32503

Country  
USA

Zip  
32503

Country  
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of Now Registered Agent

Wallace D. Moran  
3005 N. Ninth Avenue  
Pensacola, FL 32503

Name  
Wallace D. Moran  
Street Address (P.O. Box Number is Not Acceptable)  
4400 Bayou Blvd.  
Suite 25-E  
City Pensacola FL Zip Code 32503

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 Wallace D. Moran, President

4-30-01

Signature typed or printed name of registered agent and the 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, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME Moran, Wallace D. ☐ Delete  
STREET ADDRESS 3005 N. Ninth Avenue  
CITY - ST - ZIP Pensacola, FL 32503

TITLE  
NAME Moran, Wallace D. ☒ Change ☐ Addition  
STREET ADDRESS 4400 Bayou Blvd  
CITY - ST - ZIP Suite 25-E  
Pensacola, FL 32503

TITLE  
NAME Deason, Kerry L. ☐ Delete  
STREET ADDRESS 3005 N. Ninth Avenue  
CITY - ST - ZIP Pensacola, FL 32503

TITLE  
NAME Deason, Kerry L. ☒ Change ☐ Addition  
STREET ADDRESS 4400 Bayou Blvd.  
CITY - ST - ZIP Suite 25-E  
Pensacola, FL 32503

TITLE  
NAME Deville, Earine ☐ Delete  
STREET ADDRESS 3005 N. Ninth Avenue  
CITY - ST - ZIP Pensacola, FL 32503

TITLE  
NAME Deville, Earine ☒ Change ☐ Addition  
STREET ADDRESS 4400 Bayou Blvd.  
CITY - ST - ZIP Suite 25-E  
Pensacola, FL 32503

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

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

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

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

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

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

13. I hereby certify that the information supplied with this filing does not qualify for exemption stated in Section 119.07 (X), 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: Wallace D. Moran, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/2001

(850) 202-2218

Date

Daytime Phone #

CR2EO34 (1/00)