

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2002 8:00 am
Secretary of State

01-17-2002 90028 039 ***150.00

UBR 10.00 AI

DOCUMENT # P00000038822

1. Entity Name

WEATHER CHANGER, INC.

Principal Place of Business

**317 W MAIN STREET
 APOPKA FL 32712
 US**

Mailing Address

**317 W MAIN STREET
 APOPKA FL 32712
 US**

2. Principal Place of Business

3113 N. HWY 441

3. Mailing Address

P. O. BOX 745

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ZELLWOOD, FL

City & State

ZELLWOOD, FL

Zip

32798

Country

ORANGE

Zip

32798

Country

ORANGE

4. FEI Number

59-3243883

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**STATTON, MICHEAL T
 317 W MAIN STREET
 APOPKA FL 32712**

7. Name and Address of New Registered Agent

Name

STATTON, MICHEAL T.

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

3113 N. HWY 441

City

ZELLWOOD

FL

Zip Code

32798

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

MICHEAL T. STATTON, PRESIDENT

JAN 7, 2002

Signature of person 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. ☐

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 **P** ☐ Delete
 NAME **STATTON, MICHAEL T**
 STREET ADDRESS **317 W MAIN STREET**
 CITY-ST-ZIP **APOPKA FL 32712**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 **P** ☒ Change ☐ Addition
 NAME **STATTON, MICHAEL T**
 STREET ADDRESS **P. O. BOX 745** **ZELLWOOD, FL 32798**

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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 CITY-ST-ZIP

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: MICHEAL T. STATTON, PRESIDENT 1/7/02 407- 884-7795

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)