

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2002 8:00 am
Secretary of State

01-31-2002 90064 049 ***150.00

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DOCUMENT # P00000060911

1. Entity Name

RICKLIN ELECTRIC UTILITY SERVICES, INC

Principal Place of Business

**7539 SE 64TH STREET
NEWBERRY FL 32669**

Mailing Address

**7539 SE 64TH STREET
NEWBERRY FL 32669**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3658114

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GREEN, RICHARD W
7537 SE 64TH ST.
NEWBERRY FL 32669**

7. Name and Address of New Registered Agent

Name

George A. Green, Jr

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

7539 SE 64th Street

City **Newberry**

FL

Zip Code **32669**

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 **George A. Green, Jr Director**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

George A. Green, Jr **1-7-2002**

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	D	<input checked="" type="checkbox"/> Delete
NAME	GREEN, RICHARD W	
STREET ADDRESS	7537 SE 64TH ST.	
CITY-ST-ZIP	NEWBERRY FL 32669	
TITLE	D	<input type="checkbox"/> Delete
NAME	GREEN, GEORGE	
STREET ADDRESS	7539 SE 64TH STREET	
CITY-ST-ZIP	NEWBERRY FL 32669	
TITLE	D	<input type="checkbox"/> Delete
NAME	WEST, TOM	
STREET ADDRESS	7539 SE 64TH STREET	
CITY-ST-ZIP	NEWBERRY FL 32669	
TITLE	D	<input type="checkbox"/> Delete
NAME	WEST, TOM	
STREET ADDRESS	118 STONEMILL	
CITY-ST-ZIP	MADISON MS 39110	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Linda M. Day	
STREET ADDRESS	7537 SE 64th Street	
CITY-ST-ZIP	Newberry, FL 32669	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

George A. Green, Jr **GEORGE GREEN D**

1-7-02

352-472-6110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)