

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000073192

1. Entity Name

CLI TECHNOLOGIES, INC.

FILED

May 12, 2001 8:00 am
Secretary of State

05-12-2001 90039 018 ***150.00

Principal Place of Business

333 B. ENTERPRISE DRIVE
OCOE FL 34761-3001

Mailing Address

333 B. ENTERPRISE DRIVE
OCOE FL 34761-3001

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

16725 BAY CLUB DRIVE

Suite, Apt. #, etc.

City & State

CLERMONT FL

Zip

34711

Country

USA

4. FEI Number

59-3661482

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GREENWOOD, CHARLES LEE
333 B. ENTERPRISE DRIVE
OCOE FL 34761-3001

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, 2001 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 ☐ Delete
NAME P
STREET ADDRESS CHARLES LEE GREENWOOD
CITY-ST-ZIP 16725 BAY CLUB DRIVE
CLERMONT FL 34711

TITLE ☐ Delete
NAME VP / S
STREET ADDRESS BILL IREY
CITY-ST-ZIP 9210 CHARLES E. LIMPOS
ORLANDO FL 32836

TITLE ☒ Delete
NAME V.P.
STREET ADDRESS R.J. IREY
CITY-ST-ZIP 126 DIANE DRIVE
MONONGAHELA PA 15063

TITLE ☒ Delete
NAME VP / T
STREET ADDRESS WILLIAM C. STEIN
CITY-ST-ZIP 106 CEDARWOOD DRIVE
MONONGAHELA PA 15063

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
STREET ADDRESS
CITY-ST-ZIP

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

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

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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

CHARLES LEE GREENWOOD

4-27-01

Date

407-905-9787

Daytime Phone #

CR2E034 (10/00)